POPULAR

CLASS SCHEDULE

of

NAME Cpl. M. Blecharczyk

SCHOOL Fort Harrison CLASS

PERIOD	MONDAY COURSE	INSTRUCTOR	ROOM	PERIOD	TUESDAY COURSE	INSTRUCTOR	ROOM	PERIOD	WEDNESDAY COURSE	INSTRUCTOR	ROOM
1	100	[illegible]		1	100	WMA		1		964	
2	97	[illegible]		2	100	NURSING		2		100 / 1064	
3	89	[illegible]		3				3			
4	92	MED. AID		4				4		96	
5	97	M.M.		5		96		5	10	964	
6	90	HPD		6	11	1064		6		90	
7	92	M.A.		7		89		7		64	
8	97	A-P.		8		74		8		60	

PERIOD	THURSDAY COURSE	INSTRUCTOR	ROOM	PERIOD	FRIDAY COURSE	INSTRUCTOR	ROOM	PERIOD	SATURDAY COURSE	INSTRUCTOR	ROOM
1	764			1		8		1			
2				2		11		2			
3				3		5		3			
4				4				4			
5				5				5			
6				6				6			
7				7				7			
8				8				8			

100
97
89
92
97
90
565

HOME ADDRESS

CITY

TELEPHONE

[redacted]

51

565

9 | 864 — 96
81
54

18
2
25

6 | 565 — 94
54
25
24

8 | 764 — 95
72
44

764
100
864

40.

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W.D. A.G.O. 65-10

DATE ISSUED 1 Mar 45

WIRE A.G.O. IN CASE OF EMERGENCY

LOSS OF THIS CARD MUST BE REPORTED AT ONCE

HEIGHT	WEIGHT	HAIR	EYES	DATE OF BIRTH
[illegible]	[illegible]	Brown	Brown	1, Dec 17

IDENTIFICATION NO S 153202

LEFT INDEX

FINGERPRINTS

RIGHT INDEX

(1) THE BEARER OF THIS [illegible] AGED EXCLUSIVELY IN THE REMOVAL TRANSPORTA[illegible] EATMENT OF THE WOUNDED AND SICK OR THE A[illegible] OF SANITARY FORMATIONS AND ESTABLISHMENTS[illegible] EMBER OF THE CHAPLAINS' CORPS, AND IS ENTIT[illegible] CT AND PROTECTION FROM THE ENEMIES OF THE [illegible] AS REQUIRED BY ARTICLE 9 OF THE GENEVA C[illegible] JULY 27 1929 FOR THE AMELIORATION OF THE [illegible] F THE WOUNDED AND SICK OF ARMIES IN THE FIE[illegible] HER AGREEMENTS AND THE EST[illegible]

(2) THIS [illegible] OF THE GEN[illegible] ORATION OF [illegible] RMIES IN THE [illegible]

IF FOUND FINDER WIL[illegible] ETURN IT TO NEAREST U. S ARMY HEADQUARTERS [illegible] IN U S MAIL BOX POSTMASTER POSTAG[illegible] D--RETURN CARD TO THE ADJUTANT GENERAL, W[illegible] C

[illegible] G

THIS CARD IS ISSUED BY THE WAR DEPARTMENT FOR OFFICIAL USE OF THE HOLDER DESIGNATED HEREON ITS USE BY ANY OTHER PERSON IS UNLAWFUL AND WILL MAKE THE OFFENDER LIABLE TO HEAVY PENALTY

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Lecture I – General Considerations
11 Sept. 44

Anatomy & Physiology

Anatomy – refers to the study of the structures of the body.
Physiology – study of the functions of the Body

Vertebrates – animals with a skeleton
Invertebrates – outside skeleton
Endoskeleton – internal skeleton
Living matter – 1. Chemical processes
a. Assimilation and Utilization of food
b. Excretion of Waste.
2. Energy. – Heat
3. Irritation – Touch.
4. Excitation – Response to irritation

Cell – Basic unit of living organism
1. Cell membrane

2. Cytoplasm – go between cell membrane & Nucleus

Structure of Human Body

Muscle – Protein
Bone – [illegible]
Brain – Carbohydrates – Protein
Blood –

Reproduction – Ability to reproduce itself.
Osteology – Study of Bones
Arthrology – " " " Joints

Visceral Anatomy – study inside contents of abdomen

Lec III

Skeleton

I General Structure of skeleton.
1. Support
2. Leverage
3. Gives shape and form of body

II Function of skeleton
1. Stability
2. Form or shape
3. Affords protection
4. Affords motion thru joints

III Unit of skeleton – bone
1. Elasticity
2. Hardness

IV Composition of Bone
1. Gelatine (Protein)
2. Mineral (Lime salts)

1. Compact bone (outside portion of bone)
2. Cancellous bone
3. Bone marrow
4. Periosteum (covering around bone)
5. Long Bones — Types of Bone
6. Short Bones
7. Flat Bones

8. Irregular bones.

V Bones of upper extremities
1. Scapula – shoulder blade
2. Clavicle – collar bone
3. Humerus – upper arm
4. Radius } bones of forearm
5. Ulna }
6. Carpal – wrist bones.
7. Metacarpal – hand.
8 Phalanges –

Lec. IV
14 Sept. 44

Skeleton

I Bones of lower extremity
1. Innominate bone
   a. Ilium
   b. ischium
   c. Pubic – Symphysis pubis
2. Femur
3. Patella
4. Tibia – larger
5. Fibula
6. Tarsal
7. Metatarsal
8. Phalanges

II Spinal Column – 33 Bones
Seven cervical bones – 7
Thoracic vertebrae – 12
Lumbar – 5
Sacral – 5
Coccygeal – 4
(33)

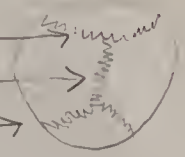
cervical
Thoracic
Lumbar
sacral
coccygeal

III Breast Bone
1. Manubrium
2. Sternum
3. Xiphoid

Lec. 5

Anatomy & Physiology

1. Bones of Skull.
   a. Occipital Suture →
   b. Sagittal Suture →
   c. Frontal Suture →



1. Frontal Bone — 1
2. Parietal " 2
3. Occipital " 1
4. Temporal 2
5. Sphenoid
6. Ethmoid

} SKULL

Face Bones
Mandible — Lower Jaw
Maxilla — Upper Jaw
Nasal — Bones of nose
Palat — Roof of mouth
Foramen Magnum — Large opening

Classification of Joints.
Joints — Junction of two or more bones which permits motion
1. Structure of joint
   1.a. Bones
   2.b. Cartilage

3 c. Synovial membrane
4 d. " Fluid
5 e. Joint capsule
6 f. Ligaments

Types of Joints.
1. Immovable joint - Synarthrotic
   a. Sutures
2. Amphiarthrotic - Slightly movable
   Symphysis Pubis
3. Diarthrotic - freely movable
   a. Hinge joint - elbow
   b. Pivot joint - Head
   c. Ball + Socket - Hip + Shoulder
   d. Gliding - wrist

12 pr. of ribs.
7 lower called false
2 floating
7 True

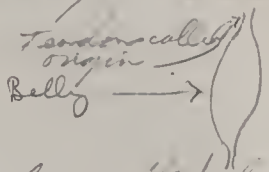
7 true
5 Floating
2 False

Lec VI

Muscle & Connective tissue

I Function of muscle is to provide strength as well as motion
(a) Locomotion

II Parts of Muscle



Origin - where muscle is attached to bone.
Belly - meat
Insertion - tendon hooked to part that is to be moved.

Muscle made up of
1. Tendon
2. Muscle Tissue
3. Connective Tissue

Groups of muscle
1. Voluntary — Striated
2. Involuntary - Smooth
3. Cardiac Muscle - striped & smooth

Action of Muscle
1. Extension
2. Flexion
3. Pronation
4. Supination
5. Rotation

6. abduction
7. adduction

All or non-all

a muscle fiber never partially contracts it always contracts to its fullest extent.

III Connective tissue

1. Supporting structure holding body together.
    1. Blood vessels
    2. Nerves
    3. Fat
    4. Muscle
2. Areolar
    1. Supports fatty tissue
3. Fibro-elastic.
    1. Ligament
    2. Tendons
4. Reticulated
    1. Spleen
    2. Lymph Glands
5. Adipose or fatty
6. Cartilage
    1. Bone

Lec. VII

The Respiratory System

I Is the process by which oxygen is taken into the lungs. The oxygen enters blood stream and is exchanged for Carbon Dioxide. Respiration also occurs in the skin.

II Purpose
1. Supply oxygen to the body and take off waste.

III Parts of Body that make up respiratory system.
1. Nose
2. Para nasal sinuses
3. Mouth
   1. Nasal cavity and mouth cavity separated by hard palate.
4. Pharynx
5. Larynx
6. Trachea
7. Bronchi
8. Bronchioles
9. Alveoli

2. Left lung has 2 lobes. Right lung has 3 lobes.

IV Phases of mechanics of Respiration.
Inspiration
Expiration
Rest Phase

V Factors Influencing Breathing

1. Nervous system
   1. Medulla Oblongata - Base of Brain.
2. Mechanical Factor
   a. Pain
   b. Cold
   c. Heat
   d. Coughing and Sneezing
   e. Pressure exerted on Carotid Sinus
3. Chemical Factor.
   1. Carbon dioxide
4. Normal rate of expiration
   16 – 18

VIII

SKIN

I Functions of skin (medulla ... oblongata)
1. Provides protection
2. Regulator of body temperature
3. Touch
4. Excretion
5. absorbtion

II Parts of skin Structure
1. Epidermis - outer layer
2. Dermis - Inner layer

III
1 Pores - Sweat glands INSIDE SKIN
2. Sebaceous glands - or oil glands
a. Base of hair
3. Skin capillaries

IV Regulation of Temperature

V. Appendages of skin
1. Hair
2. Nails

Pul Blood infuse gases in Rt. Aur

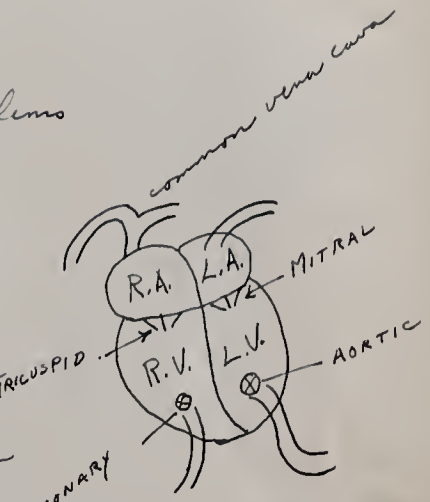
LEC. # 10

Circulatory System #1

I Parts of Circulatory System
1. Heart
2. Arteries
3. Capillaries
4. Veins

II Types of Circulatory Systems
1. Systemic
2. Pulmonary
3. Hepatic

III ~~Heart~~ Structure
1. Pericardium
2. Heart Muscle
   a. Myocardium
3. Endocardium
4. Heart Valve
5. Tendons of heart valves.



IV Regions of Heart
1. Rt. Auricle
2. Left Auricle
3. Rt. Ventrical
4. Left Ventrical

V Four sets of Valves
1. Tricuspid V.
2. Pulmonary V.
3. Mitral V. Bicuspid
4. Aortic V.

II

Circulatory System

I. Blood of Body is a tissue
  1. Cellular portion
    a. Red Blood cells - Erythrocytes
    b. White Blood " - Leukocytes.
    c. Platelets
  2. Liquid:
    a. Plasma - No liquid part of blood minus cells.
    b. Serum - " plasma " " minus fibrin
      1. Proteins
      2. Mineral
      3. Water
      4. Salts

II 5-6 qts Blood in Human body.
  5½ million R.B.C. per cmm.
  5000 - 7000 W.C. per cmm
  186,000 Platelets / cmm
White cells act as cleaners of body.
Platelets help in the coagulation of blood.

III Lymphatic System - similar to [illegible]
  Lymph Glands - washtubs for filtering germs
  Thoracic duct - Biggest lymphatic duct in body
    Left subclavian vein.
  Spleen - acts as blood reservoir
  Lymph Capillaries

Lymph vessels
" nodes or gland
Spleen largest lymph gland in body.

Physiology of heart.
1. Contraction of heart. - Systole
2. Diastole - Relaxing
3. Rest period -
Blood Pressure
1. Normal - $\frac{120}{70}$
a. Wrap ballon like cuff around arm.
b.

12 Lec.

Circulatory System Pt. 3

Capillary Loop - point where arterial capillarys meet venous capillary.

I Main Blood vessels of body.

1. Aorta
2. Coronary Arteries - Supply heart muscle
3. Right innominate Artery
4. Rt. common Carotid - Left common Carotid
5. Rt. Subclavian - Left Subclavian
6. Bronchial Arteries -
7. Intercostal " Between Ribs.
8. Gastric " Stomach
9. Hepatic " Liver
10. Splenic " Spleen
11. Renal " Kidneys
12. Mesenteric " Intestine
13. Iliac " on way back bits
14. Femoral " Inferior Vena Cava
15. Popliteal "
16. Tibial "
17. Fibial "
18. Vessels of foot.

Arm

1. Subclavian

2. Axillary
3. Brachial
4. Ulnar
5. Radial
6. Arteries of Hand.

II Hepatic Circulation
1. Begins and ends in capillaries.
2. The Portal vein is the one which enters the liver carrying food from the abdomen to the liver. From the liver it is carried by the Hepatic Vein to the Inferior Vena Cava.

Parts of Aorta
1. Ascending
2. Arch
3. Descending
4. Thoracic
5. Abdominal

Lec. 13

Lt. Kohlerman.

Food

I Food is fuel of Body.
1. Proteins - Muscle tissue
amino acids - 25
2. Fats
3. Carbohydrates (Starches + Sugars)
energy of body

II Accessory Foods
1. Minerals
2. Vitamins
3. Water

III Liver breaks up [illegible] proteins into amino acids for muscle
Liver storage for body.

Fats taken up by liver into Fatty acids + Glycerol,
Liver breaks up carbohydrates into Starches + sugars - used for energy of body.

IV Minerals
1. Inorganic Salts (Table salt)
a. Sodium
b. Potassium
c. Calcium
d. Iron
e. Iodine
f.

V Water

Water balance is the ratio of water intake to water output.

- A ← Vitamins
- B
- C
- D
- E
- K
- P.P.

LEC 15

Digestive System

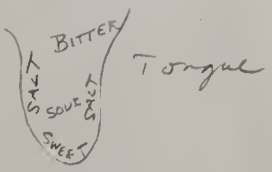
I Enzyme is a chemical substance of the body which enters into the chemical reaction of breaking down foods without itself being changed.

II 14 different kinds of Enzymes.

Proteins — Trypsin
Fats — Steapsin
Carbohydrates — Amylopsin.

III Anatomy of Digestive System

1. Lips
2. Mouth
   a. Teeth
   b. Tongue
   c. Glands



Tongue

3. Pharynx
4. Epiglottis
5. Oesophagus
6. Stomach
7. Small intestine — 23 ft.
   a. Duodenum
   b. jejunum
   c. ileum

8. Large Intestine
   a. Cecum - where small intestine goes large intestine.
   b. Ascending Colon
   c. Transverse "
   d. Descending "
   e. Rectum
   f. Anus

All organs of digestive tract has smooth
IV Peristalsis - contraction and of system
* Accessory organs of digestion
   1. Gall Bladder
      a. Located underneath the liver for storing Bile.
      b. Liver has 4 Lobes
      c. Pancreas

Liver 4 lobes
   1. Right
   2. Left
   3. Quadrate
   4. Caudate

Liver old hemoglobins
Functions of Body
1. Breaks down food for the body.
2 Makes antibodies for the
3. Makes Bile out of old hemoglobin

4. Storage house

V. Gall Bladder is a bag like structure located in the right and quadrate lobe of the Liver. Function is to store bile and to concentrate it. Also to release it into the intestine when needed.

VI. Pancreas is the organ divided

1. Head — at duodenum
2. Body
3. Tail — at Spleen

Produces

Insulin ← Regulates sugar in Body.
Hormone – enzymes – 3

Common Bile duct
Pancreatic "
Stomach "
} Empty into duodenum

General Functions of Digestive Tract.

VII. 1. Ingestion
2. Chew - Mastication
3. Salivation
4. Swallowing
5. Secretion
6. Absorbtion
7. Elimination

VIII / Physiology of Digestion

1. Mastication
   a. Break large into small
2. Deglutition
3. Salivation
   a. Enzymes.
4. Gastric Juices
5. Peristalsis of Intestines & Juices
6. Absorbtion
7. " fluids in large intestine.
8. Defecation

G. U. System

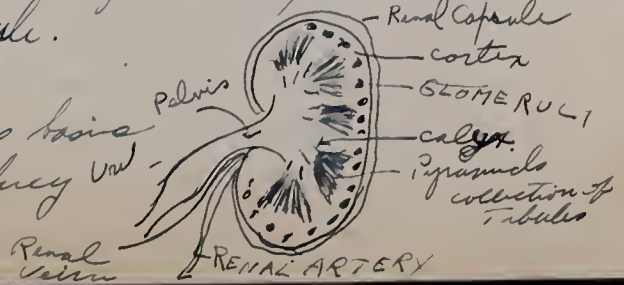
I Organs concerned with the formation and excretion of urine, and those concerned reproduction.

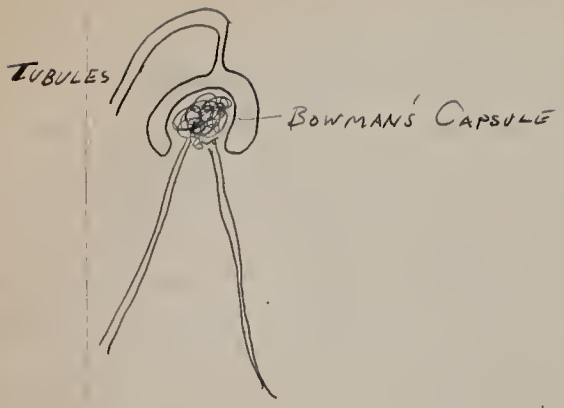
II Urinary System
1. Kidneys
2. Ureters
3. Bladder
4. Urethra

III

III Kidney — Ren
a. Paired structures
b. Lie on body in rt. & left. lumbar region. posteriorly.
c. Concave on inside convex on outside
d. It is not attached held up by intestine and peritoneum.
e. Bean shaped structure.
1. 4½" long 2" wide 1.2" Thick.
f. Enclosed in fibrious capsule called renal capsule.

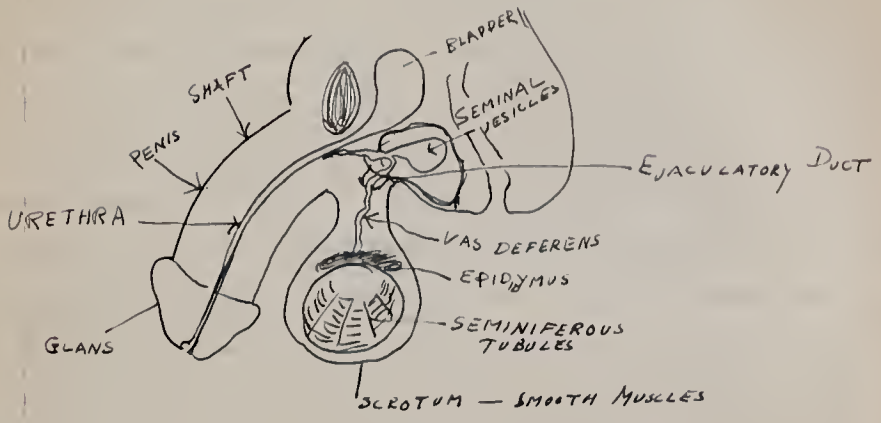
g. Glomerulus basic unit of Kidney





1. Ureter 13 cm — tube leading to bladder from kidney.
2. Bladder - distensible sack located dorsal to the symphasis pubis anterior to the rectum inside looks like mucosa of intestine.

Reproductive System: (MALE)



2 Halves in testicle septum divide 20-25 yrs.

: Protozoa

Methods of Reproduction.

1

Veins of ~~foot~~

Tibial or Fibularis

Popliteal

Rt. Iliac

Inf. Vena Cava

Coronis " "

Nervous System

I [illegible] by which [illegible]

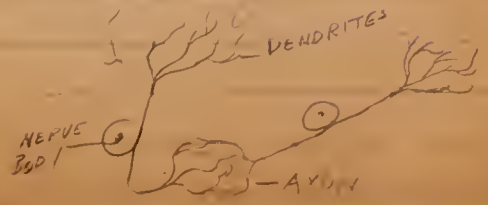
II Central Nervous System
1. Brain & Spinal Cord
2. Cranial Nerves
3. Peripheral Nerves

Controls all voluntary motions

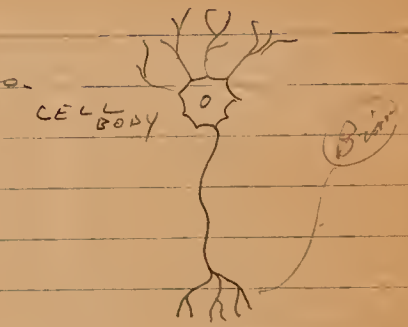
III Autonomic Nervous System
[illegible] control of functions of body [illegible] we have no control.
1. Sympathetic
2. Parasympathetic

Neuron — a nerve cell
2 types of nerve cells
1. Sensory — [illegible]
2. Motor — [illegible]

Sensory neuron



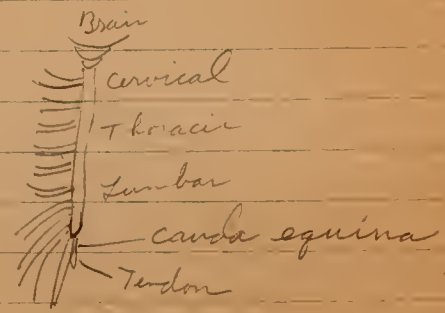
Motor Neuron



III. Brain

1. Cerebrum - Lining of brain to think, will power, appreciation
2. Cerebellum - Base of brain
3. Medulla Oblongata
4. Pons

Spinal Cord.



12 pr. Cranial Nerves

31 pr. Spinal Nerves.

- pr. 8 cervical nerves
- " 12 Thoracics
- " 5 Lumbars
- " 5 Sacrals
- " 1 Coccygeal

Cranial Nerves

I Olfactory — Sense of Smell Sensory
II Optic — Sight - Sensory
III Oculomotor - Moves Eye 4 muscles
IV Trochlear — " " 2 "
V Trigeminal — motor + Sensory nerves. - Face sensory.
VI Abducent - Sensory
VII Facial — Muscles of face
VIII Acoustic — Hearing — sensory
IX Glossopharyngeal - Tongue - THROAT. mouth - taste Mixed Ner.
X Vagus - Movement of tongue
XI Accessory - Muscles of throat — Sensory.
XII Hypoglossal - Sensation to floor of mouth - Sensory

Largest
Smallest

ON
OLD
Olympus
Towering
Tops
a
Fat
Assed
German
Vault

And
Hops.

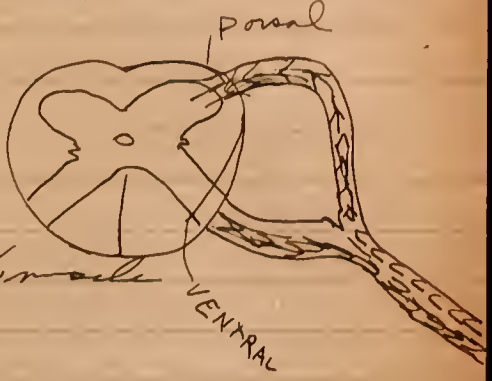
Functions of Nervous System.

I Cerebrum
Frontal Lobe
2 Parietals Lobe
Occipital Lobe
2 Temporal Lobe

II Ventricals - Where spinal fluid is formed
Hollow cavities
1. Thinking
2. Appreciation
3. Emotion
4. Sensation
5. Fine movements
6. ~~Sx~~ Location of five Senses.
7. Motor + Sensory impulses.
8.
Cerebellum.
1. Influences muscular action.
2. Moderates muscular tone.
3. Center for reflex action.
4. Center of Equilibrium
5. Medulla Ablongata Functions
1. Center of cardiovascular control.

2. Center of Respiratory Center
3. Vomiting center.
4. Center of swallowing.
5. Pons - place where fibers cross over to respective part of brain.

Reflex Arc



1. Controls cardiac muscle
   Glands - heart.
2. Parts.
   Sympathetic
   Parasympathetic

Special Senses.

Senses are organs which receive messages from the outside.

Five Special Senses.

I. General Sensibility
   a. Pain
   b. Pressure
   c. Touch
   d. Heat
   e.) Cold
   f. Proprioception

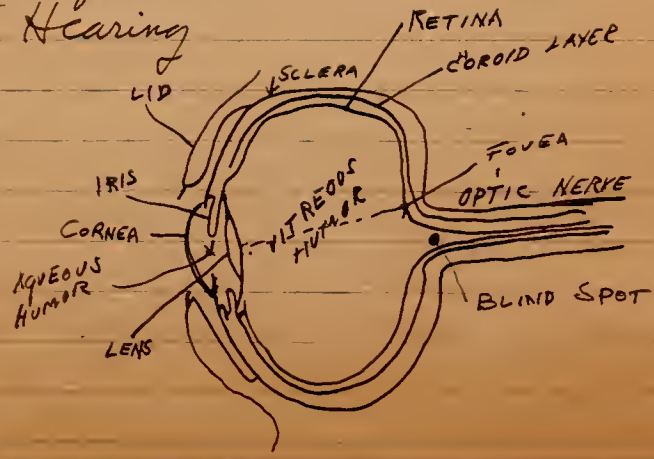
II Smell (Upper part of nose)

III Taste

IV Sight

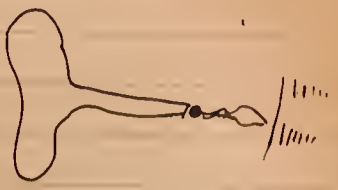
V Hearing

EYE



EAR

1. External Ear
2. Middle Ear
3. Inner Ear.
   - 3 Bones in ear.



Endocrine Glands

DEF: are glands that secrete chemical substances called hormones.

Hormone - chemical substance of body which stimulate other organs and tissues.

Endocrine Glands

1. Thyroid - tropic
2. Parathyroids - tropic
3. Adrenal - tropic
4. Pancreas - tropic
5. Gonads -
6. Pituitary Gland - Middle of Brain — Master Gland
7. Pineal — Unknown
8. Intestinal.
9. Thymus.

Tropic - hormone for all other Endocrine glands.
Lactogenic Hormone - for manufacture of milk.
Pituitary Gland - center of growth factor
Thyroid 1. Growth factor. Thyroxin
2 Control metabolism.
Catabolism - Breakdown of foods
Anabolism - Build up of foods
3. Mental development
4. Attainment of sexual maturity
Parathyroid - Calcium regulator
1. Parathormone Calcium metabolism
I Pancreas - two fold gland
1. Islands of Langerhans - Insulin.
Double gland - 1. Insulin 2. Enzymes.
II Intestinal Glands - Hormone
1. Duodenum Glands
2. Adrenal - above kidneys
1. Control B.P.
2. Hormone - adrenalin
3. Fright, flight, fight secretion

Gonads - Testosterone

1. Development of secondary ~~de~~ ~~[illegible]~~ characteristics

LECTURE 1 — NURSING
11 SEPT. 44

NURSING

TOPIC — PRINCIPALS OF NURSING

1. Prevention of disease.
2. Return to health.

Hosp. Personel according to Rank

1. Ward officer — M.C. 1st Lt. to Col.
2. Nurse — Registered Nurse
3. Ward Master — Non Com
4. Technician
5. Duty Personnel

Observe Patient's signs and symptoms

1. Report all changes
2. Be dignified, clean, no boisterousness, no profanity.

General Nursing Procedure

1. Diagnosis
2. Treatment of diseases
3. General Care of Patient
   a. Taking T.P.R.'s
   b. Care of Bed Patients.
   c. How to give Back rubs.
   d. Bed baths
   e. Serving of meals.
   f. Use of Psychology

g. Care of Contagious diseases

LECTURE #2

BED & BED MAKING

BEDS

1. Gatch Bed – double cranks for elevation
2. Fracture Bed – no springs, steel bars or plates, uprights and pulleys. Hard thin mattress.
3. Preoperative Bed
4. Postoperative Bed.
5. Regular Bed
6. Shock Bed. – elevated from foot to head
7. Convalescent Bed.

—— Bedside table

1. Emesis basin
2. Tongue depressors or forceps
3. Mouth wipes.
4. Extra Pajama coat.
5. Pitcher of ice water.

Baths and Bathing

I Two types of baths.
- a. Cleansing
- b. Therapeutic

II Uses of Baths
- a. Cleansing.
- b. Reducing Fevers
- c. General Stimulation
- d. Nerve sedative and tonic
- e. Induce perspiration
- f. Counter irritants

III Temperature of Baths
- a. 50° - 70° F. cold bath.
- b. 80° - 92° F. Tepid bath.
- c. 92° - 98° F Warm Bath
- d 98° - 105° Hot Bath

III General Baths.
- a. Cleansing Baths
- b. Reducing baths
- c Sedative baths
- e. Cold sponge bath

IV Local Baths
- a Sitz baths
- b. Foot Bath

Saline - salt Bath

Sedative – Quieting bath.
Elimination – Ejection of waste products by skin, kidneys or bowels.
Perspiration – sweating
Friction – stroking & rubbing.
Alcohol bath – 20°-5°C F.
Saline Bath – Muscle tone – 4 oz to qt water.
Alkaline Bath – Soda Bath – used ½ oz soda to gal. water, relieve itching.
Sulphur Baths – skin diseases, 2 g to tub of water.
Corn Starch bath – relieve itching, ½-1 g. to gal water
Cold Sponge Bath – 60°-50° for reducing temperature of body.
Hot Bath – relieve pain and inflammation in localized parts of body
105°-115° – 20 min.

1

Ex

Nursing Care of Communicable Disease

Fomite - infected utensils, books, magazines
Concurrent - decontamination of inanimate Books, etc.
Terminal - disinfection of room and articles

Communicable disease any disease that can be trans. from host to host by direct or indirect contact, by carrier, or by fomites.

Complications - results of disease

1. Heart failure
2. Nephritis
3. Pneumonia
4. Hemorrhage
5. Thrombosis
6. Pulmonary embolism

Types of Isolation

1. Segregation
2. Isolate individual
3. Group segregation

Enemas

Nursing II Lec.

I Enemata

Definition:
Enema is introduction of fluid into intestine by way of rectum.

a. Types
1. Low enema - anus injection only 3" 8 oz. water
2. High Enema - 6"-8" into colon 1pt-2qts.
3. Colonic irrigation.
   a. Introduction of large amount of solution given slowly over a long period of time, given high 18-24" into colon thru a 2 way tube, 28-32 French.

II. Purpose for giving enemas
1. Stimulate evacuation of large intestine
2. Relieve flatulence (gas) and distention.
3. Cleaning the colon.
4. Supply fluids to system
5. Relieve irritation,
6. Supply nourishment and stimulation.
7. Administer medication.

III. Kinds of solution
1. Formula prescribed by doctor.
2. Soap solutions in tap water 105° F.

3. Saponified oils. — Soap oil 105°F
2 oz. to gal
4. Emulsified oils — drugs [illegible] in oil.

IV Different conditions for use of enemas.

1. Flatulence (Gas)
   a Small amount of water — given high and very warm.
2. Chronic constipation.
   a. Use large amount of solution containing saponamides oils first to remove bulk of feces. Then cleanse colon with non-irritating solution, sedative in action.
3. Stimulating Enema
   a. in Case of shock of collapse.
4. Sedative Enema — Soothing effect.
   a. small amount retained.
5. Oil Enemas are to relieve irritations also to relieve infection and distention.
6. Nutritive Enema
   1. To provide nourishment given high in small amounts to be retained. (Raw eggs, whole milk, peptonized milk.

Beef juice. Temperature of foods should not be given over 104° F.

Important facts

1. Cleansing Enema - always be given before a nutritive enema, if the nutritive enema is to be given over a period of several days.

2. Never continue enema if patient complains of pains - let him rest, evacuate, then start again.

Lec. II
12 Dept. 41 TPR

Temperature, Pulse + Respiration

I. Temperature (measurement of Body heat.
Heat - 1. Muscles produce heat by exercise in reaction
2. High external temperature.
3. Emotion
4. Metabolism (Breaking down of food)

II Loss of Heat
1. By excretion
2. Expiration of air
3. Inspiration of air
4. Perspiration
5. Conduction + Radiation of Body

III Controlling heat production
1. Controling Protein intake.
2. Stimulation of adrenal gland.
3. Involuntary muscular activity.
4. Voluntary exercise.

IV Where to take Temp.
1. Oral — 98.6° 3 min.
2. Rectal — 99.6 3-5 min.
3. Apillary — 97.6 10 min.

Centigrade — 37° normal = 98.6° Fahrenheit
Fahr — 94° — 106°
Centigrade 34° — 43°

97° is Subnormal temperature.
102°-105° High temperature,
Over 105° Hyperpyrexia
Fever start - onset
Sudden - invasion
High constant fever - Stadium
Decline to normal - Defervescence
Gradual decline - lysis
Sudden decline - crisis
Temperature lowest at 4 or 5 in morning.
Highest at 6 or 7 at night.
Take temp. 8 morning - 6 or 7 afternoon

V Pulse (Measured by the expansion of a superficial artery)
Fast Pulse - tachycardia
Slow Pulse - Bradycardia
Exercise will increase pulse
Emotion will " "
Normal Pulse male adult. - 60-72 per min.
Adult Female - 72-80 per min.
Children - 98-130° per min.
Infants - 130-140 " ".
Normal - 98.6 - 72
99.6 - 82 < Rise

VI Respiration (Breathing)

1. Inspiration
2. Expiration
3. Rest period

When to take Respiration

1. Take when at rest. Lying down
2. Take without patients knowledge
3. Rate of Respiration

16 - 20 Adults
20 - 30 Children
30 - 40 Infants

Pulse to Resp. 4 to 1

Effect Respiration

1. Temperature
2. Exercise
3. Function of heart and lungs.
4. Mental State (emotion)
5. Voluntary control
6. Diseases or drugs.

apnea - [illegible]
dyspnea - difficult breathing
orthopnea - sitting up to breathe

Sterilize Skin with merthylate
Clean with alcohol
Use alcohol sponge

Hypodermics

I Definition:
1. Under skin injection of fluid by means of syringe and hollow needle.

II Reasons
1. Act faster
2. digestive juices might destroy.
3. Get full effect of drug.
4. Cause vomiting sickness if taken orally.
5. Local anesthetic
6. Give drug to unconscious patient

III Equipment
1. Syringe – Glass – ½ cc to 100 cc
2. Needles
3. Alcohol lamp
4. Vital spoon
5. Jar alcohol sponges.
6. Forceps
7. Medication and distilled waters.
8. Water or alcohol.

IV Sites for injections.
1. Gluteal – (Buttocks-upper)
2. Deltoid – Shoulder
3. Lumbar –

V Prepare Skin

Sec. I

Sterilization of Instruments
Sutures, Rubber goods

I Care of Instruments after operation.
1. Separate sharp from general instrument
2 Wash general instrument off with cold water
3. " in soap and water.
4. Scrub with hand brush.
a. Hemostat
b. Alice clamp
5. Rinse in clear water. (Cold)
6 Dry with towel or alcohol.
7. Oil. Vaseline
Sharp Instruments
1. Same as above
2. Inspect for broken tips shell ends.
Care of Needles
1. Luer Needles - Hollow
2 Suture " Surgical
(Luer) a. Cleaning Hollow
1. Cold water
2 Warm Soapy water
3. Dry alcohol.
4 Check points
5 Replace Stylett

Suture needles.
1. Remove Blood
2 Dry.
3. Polish sharpen
in Every bag.

Sterilization
Any process of destroying all bacteria life.

Disinfection – Pertaining only to disease producing germs.

1. Autoclave.
a. Steam under pressure.
240° F 20# lbs per sq. inch
b. Boiling.
c. Chemical
a Sharp instruments
B. Bard Parker disinfectant
d. Live Steam
e. Baking (Ointments)
f. Flame

III Autoclave
General Instruments
1. Ion towels wrapped in 2 layers muslin.
2. Wrap syringes in gaze separately.
Wrap tray in muslin with syringes

V Needles.

needles

1. Test tube
2. Lace needles in gauze
3. Tube wrap in, [illegible] and coil.
4. Sutures

Catherization & Irrigation

1. Mechanical means of emptying bladder
2. It is a sterile procedure.
3. Irrigation is a continuous flow.

Catheters 8-28 French
Average size – 16 French.

I Purposes of catherization.

1. Remove Urine from bladder.
2. Obtain a sterile specimen of urine for diagnostic purposes.
3. Relieve bladder of Urine, in certain conditions when bladder will not contract.
4. Keep all intake from 6 to 6 24 hrs.

NURSING

I Gastric { Lavage - Wash
Gavage - Feed

II Tubes
1. Rhefus
2. Levine

II. Lavage
a. Wash out stomach of fermented foods or digested foods. Toxic materials. Gases. Poisonous or mucous, Cleanse, comfort, and prolong life case of cancer of stomach, Pre and Post operative treat. Used also as a diagnostic aid.

IV Equipment necessary.
1. Stomach tube.
2 Rubber drape sheet.

Procedure.
1. Remove all bridgework or false teeth.
2. Sit patient up.
3. Drape with rubber sheet.
4. Tube ice cold.
5. Tilt head back, insert into stomach 18"

6. Use about 500 cc of solution using syphon effect
7. Keep water in tube at all times.
8. Before removing tube, pinch with fingers. Remove quickly but gently.
9. Record on patients' chart amount of solution used. Kind and character of solution returned. And time given.

Gavage. — Food

1. Food or liquid into stomach or medication when needed.
2. Equipment same as for lavage except solution is 104° & 105° F.
3. Types of Food administered.
   1. Egg nog.
   2. Broth — thin soup.
   3. Milk
   4. Cooked cereals, Cooked with milk
   5. Malted milk.
   6. Cream broth.

1. To feed a person after vomiting.

or jaw or tongue.
2. Test meals
3. Supplement regular feeding.
4. To introduce antidotes in case of poison.

Record on chart time given, kind, and amount retained.

1. Test meals given for gastric analysis. The patient rests for twelve hours. Before start no smoking or drinking

Oxygen Therapy

I. Definition.
   a. Any step to increase the amount of oxygen we breath.
   B. Amount we breath depends on —
      1. Proper amount of oxygen in air.
      2. Adequate lung capacity
      3. Unobstructed respiratory tract.
      4. Adequate blood supply to the lungs.
      5. Normal blood.
         1. 20 93/100 % Oxygen
         2. Nitrogen 79 [illegible] %
         3. Carbon Dioxide + Water 3/100

II Uses of Oxygen
   1. Obstructed passageways.
   2. Disease
      a. T.B.C.
      b. Asthma
      c. Pneumonia
      d. Cardiac Disease
      e. Poison - Lung irritant
      f. " Carbon Monoxide
      g Anoxemia (Cyanosis)
         1. High Fever
         2. Rapid pulse
         3. Extreme Restlessness

Principals Rules

1. Increase concentration of less than 50% Oxygen.
2. must have moisture

NURSING

External Application

I Dry Heat
1. Relieve Pain
2 Localize Inflammation
3. Relax spasm.
4 Increase Body Heat
5. Stimulate Circulation
a. Hot water bottle (Dry Heat)
1. 2/3 full
2. Squeeze out air then fasten.
3. Cover before use.
4. Never leave on unconscious person.
6. Chemical Bag
7. Electric heating Pad.
8. Light cradle (Diathermy)
9. Ultra Violet

II Moist Heat. - More penetrating,
1. Hot Packs - Toweling hot water.
2. Poultice - Hot.
3. Corn Starch
4. Hot Compress - Hot pack with Pressure
5. Steam Room.
6. Hot wax

I

Medication and Treatment

I. Uses for Medication
1. Relieve Pain
2 Cure Disease
3. Prevent disease
4. Reduce Temperature
5. Hasten Recovery

II Things to Remember for medication
1. Md. Off. order.
2. Right patient
3. Proper dosage and correct time
4. Be sure patient takes medicine
5. Record on chart
6. Check label three times

III Care of Medicine Cabinet.
1. Near water source
2. Keep locked
3. Keep bottles clean and in order
Shelf for external applications
2 shelf Internal
3 " Poison
4. Oils, vaccines, serums are kept in refrigerator

IV Eye Irrigation
1. Rubber Bulb.
2. 9/10 of 1% salt
3. Boric acid
4. Boiled Water

5. 4"x4" gauze dressing.
6. Open eyelids
7. Hold 4x4" on cheek
8. Direct fluid away from nose.

Installation of Drops

1. Atropine — relax muscles
   1. Have patient throw head back looking down.
   2. Looking straight up and put fluid under lower lid.
2. Anesthetic

Uses of Bandaging.

I 1. Retain dressing.
2 Support injured part.
3. Control Hemorrhage
4 Keep foreign matter out of wounds.
5. Absorb wound secretions.

II Rules for applying.
1. Firmly - but not tight
2. Skin surfaces not in contact with one another.
3. Begin at smallest circumference

III 4. Application of different types of Bandages.
1. Circular - Retention bandage - anchor.
2. Oblique - " Hold splints.
3. Spiral "
4. Figure of eight - "used around joints.
5. Spiral reverse - " used on tapering extremities, will not slip.
6 Recurrent - used over stumps and hand. and head.
7. Velpeau - used to support broken collar bone.
8. Barton Bandage. - frac. of jaw.
9. Spica - Dislocation of shoulder.

#26

Nursing

I Infusion + Clysis

Intravenous Infusion is giving sterile fluid, by means of hollow needle directly into vein.

1. Stimulate circulation
2. Raise B. Pres. in cases of surgical shock or collapse
3. To replace body fluids.
   Cases of dehydration caused by high fevers, prolonged vomiting and diarrhea.
4. Restore to normal the blood volume in case of Hemorrhage.
5. Used in dilution and elimination of Toxin.
6. Equipment necessary
   1. Sterile solution of saline or glucose
   2. In sterile graduated barrel & cylinder
   3. Rubber tubing.
   4. Needle adaptors 17 19 20 gauge
   5. 2cc syringe
   6. Tourniquet
   7. Drip regulator. Thumb cut-off.

II Dangers of giving.

1. Improper solutions

2. Causing embolism
3. Too rapid injection of fluid.
4. Contamination of equipment.
5.

Procedure Intravenous Infusion.

1. Arrange equipment.
   a. Insert connecting tubes to cylinder containing sterile solution
   b. Attach cut off clamp to tube.
   c. Fit your Backa drip tube
   d. Needle adapter is fitted in end of tubing.
   e. Hang solution at least 2½ ft. above solution.
   f. Place 17-19-20 gauge needle on end of 2 cc syringe,
   g. Take alcohol sponge clean area in vicinity of elbow, select a vein, safest,
   h. After finding vein apply tourniquet Prepare a sterile field. Stab the vein with bevel of needle up. at 38° angle, positive that in vein

Remove tourniquet

Nursing # 26

After in vein turn bevel down, lower syringe to almost skin level, then push needle into vein. Allow solutions to run out of tubing to irradicate air.

Detach syringe from needle.
Connect tubing and needle.
Stabilize needle with adhesive tape or gauze
Regulate flow of solution into vein.
Usually 40 to 60 drops per minute
Make sure not to let container run dry.
After procedure completed, remove needle quickly. Placing a piece of sterile gauze, one site of injection.
When patient is unconscious stabilize arm with arm board.

III Hypodermoclysis

Giving of a sterile fluid into the subcutaneous region of the body, by means of a hollow needle.

1. Sites of injection.
   a. Under the breast
   B. thighs
   c. buttocks

d. any fatty tissue of the body where it will be more readily absorbed.

Equipment

Same as for Intravenous Infusion

1, Except of addition of Y tube. and piece of tubing and needle

2. Purpose same as infusion.

Nursing Care of

Burns

I. Classifications of Burns
   1. Burn caused by flame or Hot object.
   2. Scalding
II. Both produce same type of injury and are treated alike.
   3. Chemical Burns caused by acids and must be neutralized. Burning water, an acid or alkali.

#30

Nursing.
Aspiration and Spinal Puncture.

I. Aspiration - removal of a fluid from a cavity of the body with a hollow needle.
1. Fluid that sometimes form in the cavities of the body are classed in one or two groups.
1. Exudatio — 2. Transudatio.
Exudatio - is result of local infection & inflamation.
Transudatio - is result of generalized infection.
The removal of these fluids from the cavities is aspiration.
2. two methods.
1. Incision
2. Aspirating needle and syringe.
3. Needle and suction apparatus.
2. Procedure for chest aspiration
1. Sterile procedure.
2 Place on unaffected side and propped up on that side to spread the ribs.
3. Needle injected between 5 and 6 rib.
4. Patient usually collapses when fluid is removed from lung.

Pneumothorax

III- Pneumothorax is injection of air into pleural cavity to collapse the lung. Slow procedure because only small amount of air can be injected at one time.

Reasons for Pneumothorax.

1. Place lung at rest for healing.

Method of removing fluid,

1. Abdominal Paracentesis

2. Removal of fluid from peritoneal cavity.

Reason for removing fluid

1. Diagnostic purposes.
2. Permit drainage for Peritonitis.
3. Relieve pressure on abdominal organs.

This fluid is removed by open incision. Patient may collapse when fluid is removed.

II SPINAL PUNCTURE

1. Is introduction of a hollow needle into the spinal cavity between 4 and 5 lumbar vertebrae.

Purposes.

1. To remove fluid for diagnostic purposes.

2. Remove pressure at base of the brain.

3. To introduce serum and certain diseases and administer anesthetics

Position of Patient.

1. Patient can be in bed or his side. Head down feet up, forming an arch in the back.

2. Sitting position in a chair backward with his head down.
   In sitting on edge of table with arms laced under his knees.

Collection of Specimens

1. Sputum
   1. Deep sputum; put in glass jar.
      2. Form 55L-7 for Sputum
2. Urine - for Analysis
   1. Put in Urine then bottle.
      2. Form - 55L-6
      3. 24 hr. Specimen. 6 o'clock
3. Feces
   1. Form 55L-9
   2. Put Feces into bottle.
4. Blood Specimen
   1. Sterile specimen taken from vein.
   2. Form 55L-2
   3. Mark in Red name.
5. Spinal Tap.
   1. Form 55L-4
6. Miscellaneous - 55L-15
   1. 55L-15

Nursing Care of Pneumonia.

I 2 Forms. Pneumonia
1. Lobar
2. Broncho

A. Lobar Pneumonia is acute communicable disease, with pulmonary localization,
1 caused by diplococcus Pneumonia organism.
1. characterized by chills, Fever, sharp hacking cough, quite painful, an inflamation of a lobe or part of a lobe.

B. Broncho Pneumonia is inflamation of Bronchioles and may be caused by several different organisms, usually the after effect of other diseases.

Pneumonia prevails in all climates, more prevelant in large cities than in small due to living conditions and personal contact.

II Methods of Transmitting Pneumonia.
1. Direct by infected person or carrier.
a. Sneezing,
b. Coughing.
c. Hand to mouth infection.

Incubation period of Lobar Pneumonia
1 – 7 days.
Broncho Pneumonia - indefinite. because of result of other disease.

Symptoms.

1. Coughing
2. Sneezing.
3. Pain in Chest.
   a. Temperature arises to 103° - 104° F. remains constant for about 9 days.
4. Pulse is rapid and weak.
5. Respiration rapid shallow & painful.
6. Patient delirious. often.
7. Dilation of nostrils.
8. Sputum will have flakes

After crisis, 9 days, patient must be handled carefully. Patient must remain in bed for at least week or week ½ after fever has left. First activity to allow to sit up in bed for few hours. After sitting up then allowed to take few steps. Diet must be watched very closely. Very nutritive. High in Carbohydrates. Never to be allowed to return to work for several weeks.

Complications

1. Nephritis
2. Pleurisy
3. Arthritis
4. Meningitis
5. Peritonitis
6. Lung abscesses
7. P

Disease continues to be contagious for several months, until the patient is completely free of all discharges of the effective agents.

116 Principals of nursing.

1. Isolation,
2. Proper disposition of all discharges
3. Wear cap mask and sterile gown for protection, not allow anyone of 5 of patient.

Collection of Specimen is done about every 3rd day. and sent to Lab.

Decontaminate all discharges from mouth or nose.

Personal Hygiene.

1. Proper care of skin.
   a. Bathing.

b. Changing of clothing in response to sweating.

c. Mouth should be washed out & throat gargled about every 4th hour.

d. Accurate intake and output of all fluids. Cont.

Pre Operative & Post operative.

I Mental & Physical care of Patient.
1. Put at ease to preserve strength.

II Physical care
1. Make comfortable.
2. Extensive oral hygiene
3. Removal of dental work.
4. Remove all jewelry
5. Good cathartic
6. Soap enema
7. Saline & Glucose for 72 hrs before operation.
8. Light foods day before op.
9. All foods 12 hrs. before. stopped
10. " fluids 3 hrs. ". stopped
11. 1/6 gr. morphine before going to operating room - 25 - 40
12. Im surgery 15-20 min before scheduled operation.

Post Operative Care.
1. Prepare post operative bed.
2. Anesthetist remains with patient until conscious.

3. When in bed with stage of consciousness
4. Keep covered.
5. Intake & Output recorded on card.
6. If Pa. fails to void 8-12 hrs after opn. necessary to Catheterize.
7. All medication and diets must be ordered by physician
8. Encourage deep breathing.
9. In case patient should cough suppression to prevent rupture.
10. Watch for shock.
11. T P R taken every ½ hr. until normal.
12. Observe dressing on wound.

Nursing Tropical Fever.

I. Malaria, Dengue Fever, Yellow F.

1. Principal care
   a. Isolation

1. Isolation of Malaria cases be made to have screen or netting around or over bed.

2. Nursing care of paroxysm; stage of chill, patient nervous, has chilly sensation is nauseated. Excessive vomiting and severe headaches.

1st Stage 1-2 hrs.
1. Keep patient in bed.
2. Administer hot fluids and external heat.

2nd stage
1. Fever stage follows chills. temp. high as 106° F. Skin hot and dry.
2. Pulse Rapid, headache backache and delirium.
3. Treat. Gradually remove external heat. Ice bags, head and feet. Tepid sponge baths, warm sponge Bth
4. Drink cold fluids.
5. Place sideboards on side of bed.

After high fevers – 2-6 hrs. duration.
3rd Stage – Sweating. – Temperature drops gradually – Lysis. –
Treat – 1. Change bed clothing, keep skin as dry as possible.
2. Force cold fluids
3. Avoid all drafts.
Paroxysm will last 6 - 10 hrs
Patient very weak but none the worse for his experience.
Record – time, duration, severity of chill.
T. P. R. at beginning of first chill. & every hour until temp. down to 100° F. then every 4 hrs.
Temperature taken by axillary or rectum.
Actual treat of Malaria
20 – 30 gr. Quinine daily for 7 days.
or Atabrine 1½ gr. 3 times a day. over period of week.
Plasmotin – 1500 gr. ~~for~~ 3 times a day 7 days.
Treat — Keep patient warm
Light containing diet.
– Tepid baths.

Diet.

II Dengue Fever. - Mosquitoes F.

1. Isolation.

2. Screened for five days.

a. Symptoms

1. Weakness

2. Terrific muscular pain + headache.

3. 106° - 107° F. 2-4 days. then returns to normal.

4. 2-5 days normal, symptoms skin rash, mental depression, insomnia - Headaches, muscular pains - 2-7 days. More intense. Then leaves body.

Treatment.

1. Relieve pain with narcotics.

2. Soothing ointments on skin.

3. Light sustaining diet.

4. Patient in bed given bath. protect eyes from light irrigate daily ~~from~~ with boric acid.

Yellow Fever.

1. Isolation.
2. Darkened Room – 4 days.
3. Incubation period 4 days
4. Chills & fever.
5. Face is flushed severe abdominal pain – vomiting, Muscular cramps.
6. 3–4 days fever disappears. 103° F.
7. 48 hrs no symptoms – then symptoms repeat themselves.

Mortality 10–80% 6. Jaundice – 2nd stage.

8. Lasts up to six days.

Treatment is non-specific.

1. Treat symptoms as arise.
2. Give carbohydrate diet to protect the liver.
3. Yellow Fever vaccine will combat.
4. Daily Urinalysis
5. Protect eyes.
6. Diet withheld 3–4 days.
7. Avoid milk.
8. [illegible] Infusion of dextrose

Complications a. Skin Infections

b. Pneumonia.
c. Kidney Abscesses

Case of Psycho Casco.

LECTURE 2
11 SEPT. 44

MEDICAL AID

Classification and causes of injuries.

I Diagnosis

Steps

1- History (How, when and where)

2. Subjective signs or symptoms. (Patient feels pain)

3. Objective symptoms. (Physical exam)

1. Inspection
2. Palpation
3. Percussion
4. Auscultation

I Wounds

1. Break in any tissue of the body

I Classify by type

1. Closed wounds

a. Contusion (Pain, discoloration and swelling)

1. Bruise, blister, or Hematoma

B. Sprain (Wrench of joint.)

1. Few fibers of ligament or tendon are ruptured

C. STRAIN

1. Muscle strain

D. Dislocation (Bone out of place)

E. FRACTURE - Simple, complete, comminuted.

Breakage of bone.

F. Rupture of Internal Organs

1. Intestine.

II Open Wounds. (Break in skin)
1. Incised Wound. (Clean cut)
2. Lacerated " (Rough cut)
3. Comminuted Fract. (contact with open wound)
4. Penetrated W. (Wound into internal organs.
5. Perforated W. (Through & Through)
6. Contused W. (Edges of wound crushed)
7. Puncture W. (deep puncture)
8. Thermal W. (Burns, frostbite)
a. Necrosis of cells, — Rot of cells.
9. Chemical W. (acids, Gases, Alkalies)
10. Abrasion (Brush burn)
11. Animal or insect bite

III Classification by body location.
1. Head —
2. Neck
3. Thorax
4. Abdomen
5. Extremities
6. Joints - Open & Closed
7. Spine, and pelvis.
8. Perineum

IV Classify by type of Missile
1. Size, Type & Velocity

NURSING

2. Hand Grenade Shell fragments
3. Shrapnel
4. Concussion — air blast.
5 Flying glass & bricks
6. Bayonet, bolo, sword,
7. Blow by blunt object.

V Final Diagnosis —

a. Punched Wound, penetrating, right lower quadrant of abdomen.

B. Shrapnel Wound, compound, comminuted, fracture, middle third right femur.

c. Puncture wound, bayonet, lateral aspect, third upper, left forearm.

LECTURE II

SKIN INFLAMATIONS

I Definitions:

1. Tissue distruction and repair, due to bacteria or physical agents. Or local reaction of body to inflamation.

II Causes

a. Infection - bacteria
b. Irritation - foreign body
c. Physical & Chemical agents.
   1. Electricity + X-Ray.
   2. Heat and Cold.
   3. Antiseptics
c. Trauma - Injury

III Cardinal Signs

a. Redness - Rubor
B. Swelling - Tumor
c. Heat - Calor
d. Pain - Dolar

IV Object of Inflamation

1. Neutralize or remove irritant.

V Localization of Infection

a. Leukocytes - migration
   . Phagacytes - ingest bacteria
B. Plasma - fluids
c. Capillaries - increased blood supply
   Lymphatics

d. Formation of Pus
1. Leukocytes
2. RBC
3. Lymph
4. Fibrin

VI Spread of Inflammatory process.
a. Lines of least resistance.
1. Fascia planes, bone marrow, Tendon Sheaths
b. Lymphangitis
Lymphadinitis
c. Blood stream (Septicemia)

III Specific skin Inflammation
a. Furuncle – Boil.
a. Definition – Localized abscess in the true skin. Due to bacteria. Invasion of hair follicle, sweat gland, or subaceous gland.
B. Carbuncle – Inflammation of fat beneath the skin.
Extension and induration.

VIII Prophylactics
a. Protect surface
b. Wounds – antiseptics
1. Treatments
a. Shave hair
b. Take out hair.

c. Put on antiseptic

d. Use vaccines or X-RAY, ultra-violet. Iodthyol

Incise carbuncle — Bridiron incision

IX Inflammation of Cells. — Exhibits

I ERYSIPELAS. — Infection on face —

a. acute spreading of inflam of face thru lymph system.

1. Sulfadiazine oint.

2. Vaccine - Anti-Strep serum.

3. Ultra Violet Light.

Treatments of Wounds of Wound healing.

I. Open Wounds.
   a. 60%-70% of wounds in extremities.

II. Soft Tissue Wounds.
   a. Hemorrhage ← digital Pressure Elevation, Tourniquet.
   b. Shock
   c. Infection

III. Wound Healing. Debridement (cleaning)
   1. Primary Union or First Intention.
   2. Secondary Union or Second Intention. granulation
   3. Third Intention – Sewing

IV. Local measures.
   1. Wound Heals by growth of cells in.
   2. Aid in rest.
   3. Create a clean wound.
   4. Give wound rest.
   5. Insure good blood supply
      a. No tight dressing.
   6. To free bleeding.
   7. Protect granulation tissue.

I Wounds of abdomen and chest.

a. Signs and symptoms.

1. Pain
2. Rigidity or tenderness.
3. Pulse rate
4. Vomiting and thirst.
5. Gas shown by X-Ray

Should be supplied on within 6 hours. Any wound from knee to nipple should suspect wound in internal organ.

II Chest

1. Crushing Injuries without external wound.

a. Damage by bomb blast.
B. Tension Pneumothorax
c. Thoracic and Penetrating wound.
d. Open Pneumothorax

FRACTURES

Break in bone

I Types of
1. Simple — closed
2. Compound - open

II Classification
1. Incomplete
a. Fissure
1. Transverse
2 Longitudinal
B - Depressed - Skull
C - Puncture - Bullet
d. - Greenstick - Bent
e. -

III Complete Frac.
a. Transverse
b. Oblique
c. Impacted
d. Compression
e. Strain Frac.
f. Spontaneous
g. Pathologic
h. comminuted
i. Spiral

3. 1 Multiple
2. Complicated

IV Displacement
- a. Lateral
- b. Angular
- c. Longitudinal
- d. Rotational
- e. Overriding

V Causes
1. Direct violence
   a. Car
2. Indirect violence
3. Muscular Action

VI Most numerous.
1. Fingers and ribs.
2. Wrist + ankle
3. Skull + Clavicle

VII Diagnosis
1. History
   a. "Snap"
2. Symptoms
   1. Pain
   2. Local Tenderness

VIII Signs
1. Swelling (Local)
2. Deformity
3. Limitation of motion

4. Discoloration
5. [illegible]
6. False motion
7. X-Ray

Splint them where they lie.

Fractures

I Principles of Treatment
1. Steps - Principles
a. If ? - Rx as fracture
b. Treat shock
c. Avoid manipulation
d Protect existing wound
e. Splint
f. Move carefully
2. Treat the patient first and the fracture last.
a. Morphine
b. Traction on extremity
c. Keep him warm
3. If wound present, cover it.
a. Don't probe or wash.
b. Stop bleeding by pressure or elevation.
4. If you can't splint it, let him lie.
5. Keep him from moving bone.
a. Traction
1. Prevents damage
2. Eases Pain
3. Tenses fascia - Stops bleeding.

II Special Cases
1. Skull
a. Let them lie flat.

6. Do not use morphine.

III Lower Jaw
1. Traction - tight
2. Transport on a stretcher.

IV Clavicle, scapula
1. Sling, Velpeau B.

V Back (Dorsal)
1. Do not lift by roll
2. Keep on back - Hyperextend
3. Buttress neck.
4. Transport on rigid frame.

VI Pelvis
1. Keep on his back.
2. Rigid frame

VII Extremities
1. Apply traction. (Relieves pain & shock)
2. Thomas splint for leg.
3. Cock up splint for wrist.
4. Hand - pat roll of bandage in hand.

a. Precautions
1. Pad pressure points.
2. Do not put pressure at site of fx.
3. Pressure

Basic Rx - C. Fracs
1. Treat shock & hemorrhage

2. Prophylaxis and treat
3. Accurate reduction
4. Complete immobilization.
5. Morphine
6. Keep warm.
7. Replace fluid.
8. Evaluate condition.
9. Use Traction.

1. Debridement - clean wound
2. Serum + Drugs - Gas Gangrene - Serum

VIII Simple Treatment
1. Restore length.
2. Align joints
3. Correct rotation
4. appose fragments
5. Correct deformity.

IX Reduction
1. Closed - Manipulation - Traction & Counter traction
1. Skin - Buck's extension - adhesive
2 Skeletal - Pins, wire
2. Open Reduction.
1. Open operation (Internal fixation)
a. Screws.
B. Plates
c. Bone grafts.
d. Nails.

X Complications of Fractures

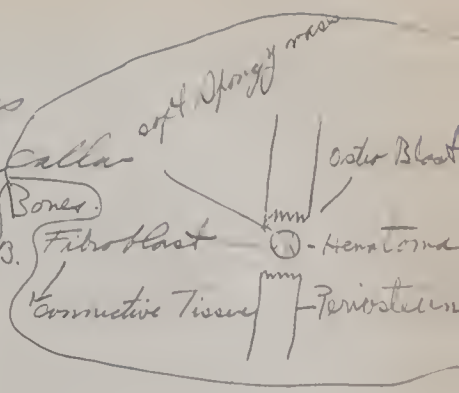
1. Shock
2. Fat Embolism
3. Injuries to nervous system
   a. Acute
      1. Dividing peripheral nerve
      2. Concussion of Spinal Cord
      3. " " Brain
      4. Division of Spinal Cord
   b. Delayed Complications
      1. Primary Neuritis
      2. Secondary "
      3. Late Palsy
4. Pneumonia
5. Injury to bladder Urinary
6. Volkmann Paralysis
7. Infection
8. Rupture of Tendon
9. Gangrene
10. Pressure Sores
11. Traumatic Arthritis
12. Mal Union
13. Non Union

FRACTURES

XI

Healing of Bones

1. Will heal in 6 weeks callus
2. Healing fast in long Bones.
3. Slow Healing in flat B.



Strains Sprains + Dislocation

a. Definition – Rupture of strains in muscle or tendons.

B. Etiology causes. – overexertion – [illegible]

C Location

1. Back
2. Arms
3. Legs

d. Diagnosis – Symptoms

1. Pain
2. Hardness
3. Swelling
4. Disability
   a. Limitation of motion.

E. Treatment

1. Early use
2. Massage + Drug Bandage
3. Heat

Sprains

a. Definition – Wrenching of a joint – that is minute ruptures of individual fibers or small groups of fibers if ligaments holding joint to intact.

B. Causes

1. Direct } violence
2. Indirect }

Inversion

Predisposing Causes

1. Previous sprains
2. Relaxation of ligaments
3. Atrophy of muscle

C. Location. — In joints of limited motion.

1. Ankle
2. Wrist
3. Low back
4. Elbow
5. Knee

D. Symptoms

1. Pain
2. Swelling
3. Discoloration - Ecthymosis
4. Tenderness over torn structures

Diagnosis - X Ray - to rule out fracture.

E - Treatment

"Le Fiche" Local anesthesia

10 - 20 cc 1% Novocaine

1. 1st 24 hrs. rest, elevation and massage
2. Immobilization - Tape - elastic bandage.
3. Rehabilitation

F. Dislocation - or Luxation

A. Definition - a change of the relationship

of the articular surfaces of a joint.
"Bone out of place"

a. Subluxation - partial change.
b. Total dislocation - Both ends
c. Traumatic
   1. acute, recurrent, Unreduced.
d. May be closed or open

B. - Causes
   Violence { Direct
            { Indirect

C. Location - Joint with unusual range of motion,
   1. Shoulder
   2. Hip
   3. Jaw
   4. Finger

D. Diagnosis
   Signs and symptoms
   1. Pain
   2. Loss of function
   3. Alteration of contour
   4. Palpation
   5. Absence of extremity of bone in normal position.

E. Differencial from Fracture
1. Look different
2. Crepitus, point Tenderness in fractures.

F. Complications
1. Injury to nerves
a. Pressure or severance
b. Traumatic neuritis. may last 2 yrs.
2. Injury to Blood vessels
3 Fractures
4. Tendons
5- Bladder & spinal cord.

Treatment of dislocation
1. Reduction soon as possible
2. General anesthesia
3. Immobilise for 3 weeks.

Capt. Knudsen

Hemorrhage

I Definition -
1. A marked loss of blood
II Types
1. Arterial - Blood will spurt
2 Venous - Slow steady stream
3. Capillary - Mostly an oozing
III Severity
1. Rapid stream
2. Slow Stream
IV Sites Blood
1. Hands
2. Feet
3. Head
V Effects of Hemorrhage
1. Loss of fluid element of blood in bra
a. Drop of blood pressure
1. Dehydrated
a. Thirst
2 Loss of RBC
a. Lazy Or
VI Primary Hem. - Quickly
Secondary Hem. - 6 to 9 days later
Intermediate Hem. - 5 to 6 Hrs. later
External Hem - Outside Hem.
Concealed Hem - Internal

VII Symptoms
1. Anemic
2. Fast pulse rate.
3. Respirations fast and sighing.
4. Skin is cold and clammy & pale.
5. Patient feels faint.
6. Restless
7. Ringing in ears
8. Loss of vision.
9. Patient needs air.

VIII Methods of control of Hemorhage.
1. Natural method
a. Blood clotting
1. Coagulation time is about 3 to five minutes.
2. Elevation
a. Capillary
b. Venous.
c. Right arterial
3 General Pressure
a. Pressure points
b. Direct pressure
1. First aid dressing
2. Compress
4. Hemostat

5. Tourniquet
   a. Precautions
      1. Location - between heart & W.
      2. Tight or snug
6. Specific Types
   a. Epistaxis - Nosy blud
   B. Pulmonary Hemorrhage - Lungs
      a. Quiet
   c. Gastric
   d. Intestinal
      1. Quiet - Ice Bag
   e. Intra-abdominal - Quiet
      Ice bag.

Med. Aid

Shock

I Circulatory Collapse
Kinds 1. Primary Shock
a. Neurogenic - arises from nervous system
b. Blood dilatation
1. Too little to brain
2. Secondary Shock
1. Shock due to injury
2. Decreased blood volume due to escape of blood from circulatory system into tissues
3. Increased viscosity
4. Anoxemia [illegible] oxygen - blood

II Cause ?
III Contributing factors.
1. Pain.
2. Nerve [illegible]
3 Cold
4 Heat
5. [illegible]
6. Exhaustion
7. Hemorrhage

Signs & Symptoms
1. Pulse Weak + Rapid

2. Respiration - Rapid & Shallow
3. Skin pale, cold and clammy or ashen gray color.
4. Mental State. - Apathetic
5. Blood Pressure is lowered. - 80 sys.
6. Nausea and Vomiting
7. Decreased Urine output.

Hematocrit - density of blood
45% 55%
55%
85%

Surgical - Roughness
Exposure
Hemostasis
Anesthetic

Restore Blood Volume.
1. Plasma
2. [illegible]
3. Shock position
4. Oxygen
5. Morphine
6. [illegible]

7. Reduce [illegible]
8. Excise [illegible]
9. Replace [illegible]

Kudelka

Burns

I Classification and Treatment

1st degree — Redness - Erythema

2nd degree — Blister -

3rd Degree - Epithelium

4th Degree — Deep in Tissue (Ch. 7)

Severeness depends on area not depth.

II Agent

1. Thermal
   - A. Fire
   - B. Boiling Liquids
2. Electrical
   - a. Electric current
   - b. X-Ray + Radium
3. Chemical

III Main causes of death in burns.

1. Primary shock + Conflagration 1 & 4 hrs.
2. Secondary shock (Burn Shock) 1 & 50 hrs.

70% of deaths — 6,000 deaths annually

3. Toxemia + Pyemia 24 - 150 hrs.
4. Defers + Complications - 72 hrs. - 4 weeks.

IV Treatment

1. General
2. Local early
3. Early skin grafting
4. Plastic operations

V. General Treatment

1. Supportive measures
   a. Rest and quiet
   b. Elevation of feet
   c. Warmth
   d. ½ gr. Morphine
      1. Intravenous
      2. Subcutaneous
   e. Stimulates (Coffee
2. Prevention + treat. of shock.
   1. Take B.P. every two hours. for 48 hours.
   2. T.P.R.
   3. Keep record fluid intake and output,
   4. Daily Blood count.
a. Oxygen given – 90% concentrated.
b. "Cortin" 5 cc – IV
   a. Extract of Adrenal Gland
c. Give Plasma – 4 to 7 liters in 24 hours.
d. 750 cc is given fast and rest given by drip method.
e. Give 100 cc of Plasma for every 1% body area burnt.
   a. Head – 6%
   b. Upper – 18%

c. Trunk — 38%
d. Lower Extremities - 19%
e. Hand — 1%

Prevention of Toxemia
1. 500 to 1000 cc of Saline
2. Hypodermoclysis
3. Glucose - 200 - 500 gm. 5 - 10%

Prevention of Infection
1. Sulfadiazine by mouth 4 gms.
2. Blood transfusion.
3. Patient to be turned over frequently for circulation
4. Tetanus toxoid
5 Iron & Vitamins

VI Local Treatment
1. Use aseptic technique.
2. Clean dead Tissue. (Debridement
3. White soap and water.
4. Vaseline gauze - left on for [illegible]
5. Thick pad
6 Pressure dressing
7. Immobilize
8. Saline Compress around rectum, face,
9. Sulfa Ointment

Complications of Burns.

1. Contractures
2. Infection
    a. Pneumonia
    b. Ulcers
3. Cancer
4. Keloid

Treatment

Sulfa Ointment
Cod liver Oint.
Compress

Skin Grafting.

1. Area 4 weeks old and healed 5 comm. skin should be grafted.

Flash Burns — Cream

Kudell

Effects of Cold

I Parts effected by cold.
1. Feet
2. Ears
3. Hands
4 Nose
5 Cheeks

Vasoconstriction - closing of blood vessels
a. Signs
1. Numbness
2. Swelling
3. Palor

Vasodilation - Vessels open up.
a. Symptoms.
1. Redness
2 Blisters
3. Pain
4. Cause blood clots - cause [illegible]

Called Immersion Foot
Trench Foot
Chill Blains

Prophylaxis
1 Water Resistant Shoes
2. Loose leggings.
3. Good diet.

4. Avoid Alcoholics

Treatment

1. Keep skin unbroken
2. Elevation
3. Cleanliness
4. Dry Refrigeration
5. Extra Diet

Actual Freezing

1. If exposed to below 14° F. will cause acute death of tissue.

2 Frostbite

1. Redness – Give Whiskey & Stimulate.
2. Tingling

2nd Stage

a. Blanches
b. Numbness

3RD Stage.

a. Anesthesia

4th Stage

Blistering.

5th Stage

1. Gangrene

Treatment.

1. Thaw slowly
2. Use Cool room

3. Cool again if thawed too fast
4. Keep Clean
5 Wrap in sterile towel and elevate.
6. If skin is broken paint with Gentian Violet.
7.

Blood Groups & Plasma

Plasma 92% wtr.
10% of War casualties require blood Trans.

I Blood Grp.

International System	— Moss	— %
O	IV	42 - Universal
A	II	43 -
B	III	11
AB	I	1

Agglutination
1. Clumping

Stock Serum A	Stock Serum B	Type
+	+	AB - I
—	+	A - II
+	—	B - III
—	—	O - IV

Cross matching

R serum + D Cells - RS - DC
D serum + Rc - RC - DS -

Reaction.
a. Hemolysis.

II. Indications for transfusions
a. Hemorrhage
b. Blood Dyscrasias
a. Leukemia
c. Acute Poisoning
a. Carbon Monoxide
d. Chronic Infection.

III. Plasma – Albumen, Globulin, Fibrin
1. Liquid
2. Powder
a. Eliminates reactions.
b. No typing or cross matching.
c. No Refrigeration.
d. Quick and Simple

Dosage
a. Give about 6 units.

Uses
Shock & Burns
~~Hemorrhage~~
Blood diseases

Blood transfusion.
1. No value in injuries in shock (like injuries to brain and spinal cord.
Harmful when given in heart failure
" Blast. Injury to chest
" Irritant & Bodily conditions

Gas Casualty

~~Trench Warfare~~

Treatment of

Gas blindness rare
Gas Casualty back in duty in 1 month.

1. Physiological Classification.
   1. Blister Gas. — Vesicants
      a. Mustard (
      b. Lewisite
      c. Ethyldichlorarsine
      d. Nitrogen Mustards
   2. Choking Gases.
      a. Chlorine.
      b. Phosgene
      c. Chlorpicrin
   3. Tear Gases.
      a. Chloracetophenone
      b. " in Benzene
      c. Tear gas solution
   4. Vomiting Gas
      1. Adamsite
      2. Diphenylchlorarsine

5. Incendaries
   1. Therm 8
   2. Electron - Magnesium
6. Blood & Nerve - Gases.
   1. Hydrocyanic
   2. Arsenic
7. 3. Incidental gases.
   1. White Phosphorus
   2. Carbon Dioxide
   3. Hydrogensulfide.

II Eyes
   a. All gases except Nerves / Systemic gases
   b. Vapor does not cause permanent damage
      Splash causes damage.
1. Symptoms.
   1. Pain
   2. Tear
   3. Photophobia
   4. Swelling of Conjunctiva
   5. Ulcer in severe burn.
   6. Symptoms appear soon except in mustard.
2. Treatment of Vapor Burns. Mustard
   1. Prevent Infection

a. Do Irrigation immediately.
b. Use Sodium Sulamid 30%
1. Use 10 drops every 4 hrs.

1. Lewisite Vapor.
1. Treat with BAL ointment immediately.
2. No rubbing, no bandage.

A. Treatment of Splash from any agent
1. Eyes washed out immediately with 2% Sodium Bicarbonate.
2. Lewisite splash best neutralized with BAL ointment.
3. Ball Solution – 3-4 drops in eye
4. Will clear up spontaneously.

Respiratory System
1. Choking
2. Blister

Damage depends on concentration
Pathological & Physiological effect
1. Blister gases damage epithelium
2. Choking gases harmless in small concentration.
3. Phosgene – effect lung
4. Hemorrhage in the lung.
5. Cyanosis
6. Frothy at mouth.
7. 80% of deaths in 24 hrs. in Resp. Cases.

Treatment. only when there are signs.
1. Absolute litter rest.
2. Oxygen
3. Sulfanimides
4. No alcohol
5. No morphine.
6. Venesection.
7. No Artificial Resp.

Skin Effects.
Mustard Patent.
1. Calamel Lotion 1% Phenol.

Symptoms of Choking Gas to Resp. Tract.
1 Constriction of Throat
2 Hoarse
3 Irregular breathing
3 Difficult breathing
4 Spasmodic coughing.
5. Constriction and pain in chest.
6. Air Hunger.
7. Cyanosis. (Blue Stage.)
8. Ashen gray stage.

Cont. Skin Effects.

1. Mustard not painful unless blister distended
2. Hydrogen mustard. – Painful and redness.
3. Lewisite – Splash almost painful immediately.
   " fluid in blister cloudy.
   " Vapor – will not blister.
4. Mustard Splash. – Large Blister – looks like donut shape. – Fluid is clear in blister.

1 cc of Lewisite absorbed by body is fatal.

Treatment of Blister Dosco.

1. Blot splash with cotton or cloth.
2. M4 ointment rub in skin for 30 sec.

Repeat 3-4 times – Wash with soap and water
If redness appears don't use oint.
Don't break blister.
Bandage with Amyl Salicilate.

LEWISITE.

Use BAL ointment early. or 8% Hydrogen Peroxide.

M5 can be used prophylactically 4-6 hrs.
Can use gasoline.

Tear Gas

1. Mild irritation of skin
2. Bathe with calamine lotion.

Vomiting Gas.

1. Attack nasopharynx
   a. Sneezing,
   b. Pain in sinus,
   c. Vomiting retching
2. Take off mask wipe out inside of mask, give nose, eye drops.

Mental symptoms.

Benzedrine.

Blood and Nerve Poisons.

1. Hydrogen Cyanide.
   a. Headache
   b. Nausea
   c Palpitation
   d. Dyspnea

Treatment.

1. Amyl Nitrate Pearls. 2-3 times
2. Artificial Resp. 1 hr.
3. Blood Trans.

Arsine

1. Cause braking up of red blood cells.
   1. Headache
   2. Cyanosis

3. Chills
4 Vomiting
5 Pain in nerves. - Polyneuritis.
6. Anuria - without urine.

Treatment:
1. Sodium Bicarbonate by mouth.
2. Blood transf (Blood first

Incendiaries.
1. Magnesium. picked out of Wound.
2 White Phosphorus. - Copper sulphate.

Carbon monoxide
1. Artificial Resp.
Sodium Sulphate.
2. Artificial Resp. - Oxygen
Hydrogen sulfiate - Instant death.

Calcium Hypochloride - Hydrogen Peroxide will cause fire.

Segregate Diseases. Protect immunes patients.

DATA FOR THE PRINCIPAL CHEMICAL AGENTS

NAME	SYMBOL	ODOR	EFFECT ON BODY	PERSISTENCY	TACTICAL USES	HOW EMPLOYED	PROTECTION REQUIRED	FIRST AID
Chlorine	CL	Bleaching powder	Attacks threat bronchial tubes, lungs; causes coughing, choking, collapse, death.	Few minutes	Casualty agent	In clouds from cylinders or projectors; replaced by phosgene	Gas mask	Remove from gas, keep absolutely quiet; keep warm; give non-alcoholic stimulants.
Phosgene	CG	Like hay silage, fresh-cut corn	Like Chlorine; more toxic; delayed action.	Ten minutes (may persist 30 minutes in pockets)	Casualty agent	From cylinders, projectors 155-mm. shell. large bombs (?) 4.2 CM shell.	Gas mask	Same as for chlorine, taking into account possibility of delayed action
Chloropicrin	PS	Like fly paper	Immediate pain in eyes; choking coughing, vomiting.	One to 12 hours	Casualty and harassing agent	In shells, bombs or airplane spray; from cylinders with chlorine	Gas Mask	Remove to fresh air; wipe off splashes with alcoholic disodium sulfide; keep quiet and warm.
Mustard	HS	Like garlic	Causes blisters on all parts of body, especially tender parts, eyes, etc; Attacks lungs; often followed by pneumonia.	One week (summer); several weeks(winter).	Casualty agent and to deny ground.	Light arty. shell; 4.2 CM shell; bombs; airplane spray	Gas mask for lungs and eyes; protective clothing for skin	Remove to pure air; remove contaminated clothing; wash off splashes with soap and water, gasolene; wash eyes with boric acid; do not bandage.
Lewisite	M1	Like geraniums	Like mustard, but quicker acting; vomiting; systematic arsenic	One to 3 days (summer); 1 week or longer (winter).	Casualty agent and to deny ground	Like mustard	Same as for mustard	Similar to mustard; essential to remove agent quickly to prevent arsenic poi-

Name	Symbol	Odor	Effect on Body	Persistency	Tactical Uses	How Employed	Protection Required	First Aid
Chloracetophenone	CN	Like apple blossoms (usually masked by smoke)	Causes intense pain in eyes; lachrymation; non-toxic; no permanent effects	In open, a few minutes; in buildings, may remain several weeks.	Training agent; harassing agent; mob control	Burning type munitions; grenades and candles.	Gas mask (or tight fitting goggles)	None needed
Tear gas solution	CNS	Like fly paper	Eye irritation followed by nausia and vomiting	One to 2 hours (summer); 6 to 12 hours(winter)	Harassing agent	Light arty. or 4.2 CM shell; small bombs; airplane spray.	Gas mask	Same as for lung irritants
Adamsite	DM	Not characteristic	causes intense irritation of nose and throat, sneezing vomiting, profound mental depression and temporary collapse. Non-toxic; no permanent effects	In open, a few minutes; may persist some time in pockets	Harassing agent; mob control	Burning type munitions; grenades, candles, shell.	Gas mask with good mechanical filter.	Remove to fresh air; wash nasal passage with solution of baking soda; have patient inhale chlorine in small amounts.
White phosphorus	WP	Like matches	None from smoke; deep burns from burning particles	Two minutes	Screening smoke; secondary casualty and incendiary effect	Shells(all calibers); rifle grenades; bombs	None needed from smoke; none provided against burning particles.	For burns; keep under water; apply copper sulfate solution to coat phosphorus particles and permit their removal.
HC Mixture	HC	Suffocating	Causes coughing; no toxic effect.	Length of time of pot or so...	Screening smoke, as substitute for WP; training munition.	Burning type munitions; posts, grenades, candles.	None needed	none need-

MED. AID.

Abdominal Emergencies.

Abdominal Pain, causes
1. Gastro-enteritis.
   a. Milk, Water.
2. Ulcers
   1. Peptic – Perforated Ulcer.
      a. Surgery
3. Gall Bladder. ←
   1. Cholecystitis – Pus → Empyema
      Symptoms.
      a. Vomits Bile.
      2. Pain in chest.
   Empyema.
      1. Pain
      2. Fever & Chills
         a Surgery
      3. Gall stones
         a. Pain – Biliary Colic
4. Intestinal Obstruction.
   1. Intussusception – telescoping
   2. ~~Volvus~~ Volvus – twist.
   3. Strangulated.
   4. Kidney Stone.

5. Appendicitis.

1. Pain
2. Nausea
3. Vomiting
4. Rigidity

No Food, water, Laxative, enema.

Gas Gangrene & Tetanus

I Cause - Aerobic organism. (Spore)
Bacilli Welchii
Lives in - Water, soil, intestinal tract.
Dust, Milk, Sewage.
Produces gas, kills, PBC. Liquifies
Proteins, cannot grow in oxygen.
Deep puncture, lacerated wound, into the muscle.
Spreads along muscles by tissue fluids

Symptoms.
1. Rise in Temp. - 103 - 105
2. Fast pulse - 120
3. Increased pain in wound.
4. Patient restless,
5. Patient apprehensive,
6. Face flushed, dry tongue
7. Anxious look on face.
8. Prostrated
9. Malaise

Signs.
1. Swelling
2. Redness

3. Acute tenderness
4. Skin of edge wound becomes red, dusky, dark - gangrene.
5. Gangrene of skin advances
6. Thin dark, stinking discharge from wound - gas bubbles.
7. Crepitus of skin.
8. X-Ray shows gas.
9. Smell acrid or money.

Prophylaxis

1. Clean wound with soap and water.
2. Operate within six hours.
3. Debridement - cut dying tissue. dirt clothing.
4. Hematoma
   a. Aspirate blood.
5. Relieve tension.
6. Good drainage.
7. Wound immobilized.
8. Give gas gangrene antitoxin

Treatment.

1. Cut all dead tissue. Blue skin.

all muscle that is dryor black
is cut away.
2. Open of wound.
3. Pack with Zinc Peroxide
a. Flood wound.
4. Amputate extremities
5. Anti Dos Gangrene - Serum
a. Into Vein.
6. Sulfathiazole

Tetanus

1. Cause
a. Anaerobic spore organism. Bacillus
b. Cl. Tetani.

Lives in Intestinal tract. Humans, horses.
1. Fertilized soil.
2. Spore will live 10 years.
3. Portal of Entry.
1. Gunshot W.
2. Knife W.
3. Insect

4. Animals Bite

Treatment.

1. Incubation period. 7-14 days

2. Exotopin - causes disease eliminated by bacillus.

Types.

1. Local.
2. Ascending.
   a. General - Descending.

Local

1. Stiffening twitching of muscle of wound.
   a. Sometimes passes off. or spreads upward.
2. Headache - shivering, muscles of jaw will stiffen, painful convulsions - temp. 107° F. Death due to respiratory failure

Prophylaxis

1. Toxoid - Active immunity
2. Booster Shot.

TREAT.:
1. Dark Room
2. Sedative
3. Use Antitoxin
4. Neutralizes Toxin

ASPHYXIA

I. Defin. — Suffocation - interference with oxigenation of blood.

Causes.
1. Mechanical Obstruction.
Upper and Lower passages.
1. Bronchitis.
2. Inflamation of throat.
a. Diphtheria
b. Angioneurotic Edema
c. Ludwig's angina.
3. Strangulation
4. Hanging - Retracted tongue
5. Foreign body in throat or trachea.
6. Pressing fingers to chest.

7. Pulmonary Edema
8. Drowsiness.
9. Inflammation in Lung (Exudates)

Lesion of nerve.
1. Injury to brain or spinal cord.
2. Swelling of Brain.
3. Inflammation of brain or spinal cord.
4. Electric Shock. Heart or Resp.
5. Deficient in oxygen intake.
6. Toxins + Poisons
7. War Gases.
8. Blood + Nerve gases.
9. Carbon monoxide.
10. Uremia

Signs + Symptoms.
1. Decrease or increase in Resp. Rate
2. Slow pulse early then faster
3. Cardiac failure.
4. Cyanosis.
5. Cool Extremities
6. Unconsciousness

First Aid.

1. Remove Cause Revive Patient.
2. Artificial Respiration
3. Respiratory & Cardiac Stimulants
   a. Coramine
   b. Metrazol
   c. Caffeine
4. Rectal Dilatation
5. Traction on Tongue
6. External Heat
7. Blood trans.
8. Oxygen.
9. Infusion.
10. Mouth to mouth Resp.

Jungle Warfare

Acclimatize in desert training

Subject to heat exhaustion, heat cramps.
Sun stroke.
Keep dry as much as possible
Avoid being chilled.
Intestinal Disturbance.
Special Clothes - Avoid tight clothes
Not absorbing heat
Aireating clothing.
Fungus infection in wet clothing.
Carry salt tablets — 3 gr. tablet for
heat cramps.
Sleeping in Jungle
off ground, use nets,

Proper food
Ready to eat foods, Corned Meats.
Dry foods, powdered milk
Emergency rations, dry vegetables and fruits.
2 lbs of food per day

Medical Aid.
Chlorine Tablets.
Atabrine, Quinine
Pills for Dysentery
Insect Repellents.

Healthful Hints.
Carry matches or lighter
Compass
Fish Supplies.
Pocket Knife
Watch
Boil Water - Strain muddy Water.
Edible Fruits.
Do not travel alone at night
Do not fear Jungle.

Preventions - Disease
Eliminate breeding - place
Repelant

Snakes.
[illegible] shaped [illegible] Heavy [illegible]

Mental Disease

more or less ~~normal~~ departure from normal thinking and doing. Maladjustment

LT. RADDE

Personal Hygiene and Sanitation

I Disease

Definition — abnormal body functions

II Classes of diseases

1. Infectious diseases
   a. Caused by infection
2. Malformation
3. New growths (Neoplasm)
4. Injuries - (Trauma)
5. Glandular disorders (Endocrine)
6. Poor diet (Malnutrition)

III Communicable Disease

1. Disease transmitted from one person to another.

Contagious Disease

1. Disease that can be transmitted by contact.

IV Organisms which can cause disease in man.

✓ 1. Virus (Ultramicroscopic) Filterable
2. Bacterium (Can be seen with microscope) [illegible]
3. Rickettsia (in between)
4. Spirochetes (corkscrew)
5. Fungus (Higher order of plant)
6. Protozoa (One celled animals)
7. Higher animals (Worms)

a. Bacteria

1. Size $\frac{1}{1000}$ mm = $\frac{1}{25,000}$"
2. Shape
   a. Spherical (Coccus) ○
   b. Rod shaped (Bacillus) ▭
   c. Spiral (spirillum)
3. Spores (dormant form of bacteria)
4. Motility (ability to move)
5. Staining
6. Capsules (coating around bacteria)
7. Growth Characteristics
8. Colony (color)
9. Flagellum (Hair like projections used for movement)

Lec 2.

Hygiene + Sanitation

Bacteria

I Cocci

1. Micrococcus (Grow singly)
2. Diplococcus (occur in Pairs)
3. Streptococcus (occur in chains)
4. Staphylococcus (clustered together)

II Two classes of bacteria

1. Aerobic — require oxygen.
2. Anaerobic - absence of oxygen
   a Tetanus - rod shaped - Bacillus
   b. Gas Gangrene

III Toxins

1. Exotoxin (outside toxin) when [illegible]
2. Endotoxin (freed when bacteria [illegible])

IV Way germs enter body — Portals of entry)

1. Respiratory tract.
2. Digestive tract.
3. Skin - Insect borne (biting)
4. Venereal
5. Miscellaneous

V Factors necessary for spread of disease.

Agency of transmission.

1. Case — animals
2. Carrier — insects
3. Source

Immunity

I. Reinforced resistance to disease
   1. Recovering to disease
   2. Vaccination
      a. Toxoid
   3. Antiserum
   4. Inheritance

II Types of Immunity
   1. Active – when [illegible] recover from [illegible] vaccinated [illegible] long duration
   2. Passive – given with antiserum (animals)

III Vaccines.
   1. Vaccine is a preparation containing [illegible] producing organisms which can be given to produce immunity. Usually dead germs.

IV Toxin
   1. Can be given to [illegible] immunity.
   2. Toxoid – like toxin – treated chemically
   3. Antiserum – antitoxin made with animals passive immunity.

V Endemic – A few diseases always present in a locality
Epidemic – Outbreak of a disease in a community.
Pandemic – World wide Epidemic.

Raffle

HPD. #6

I Respiratory diseases
a. Sources.
1. Cases
2. Carriers
3. Animals
b. Agency of transmission
1. Direct contact
2. Indirect
3 Susceptible
4. Control
c. Isolate cases - ~~Laboratories~~
Contacts
d. Quarantine
a. Pneumonic Plague
E. Control agencies
1. Avoid direct contact
a. Avoid indirect
B. Ventilation - 64 - 70° 30% Relative
2 - 4
2 Susceptibles
Proper clothing - keep dry.
Food - fluid.

II Special diseases
1. Virus infections

a. U.R.I.
   a. Cold
   b. Laryngitis
   c. Bronchitis
B. Influenza
C. Atypical Pneumonia
d. Chicken Pox
e. Small Pox
f. Measles (Globulin)
g. German Measles.
H. Mumps - Epidemic Parotitis
I. Infantile Paralysis - Poliomyelitis
J Psittacosis (From Parrot)

HPD #7

Bacterial Infectious Diseases

I

1. Pneumonia
2. Streptococcic
   a. Scarlet fever
3. Pneumonia Plague
4. T. B. C.
5. Diphtheria
6. Epidemic meningitis
   a. Meningococcus
      1 Sulfadiazine to reduce carrier rate.
7. Whooping Cough

II Spirochete

1. Trench Mouth

H.P.D. # 8

Intestinal Diseases

I General principles of spread
1. Cases
2. Carriers
3. Animals

II Most important ways transmitted
Food
Water
Flys
Hands
Miss equipment

III Susceptibles
Most people have moderate immunity

IV Control Measures
1. Doses
2. Cases Isolated
3. Carriers treated
4. Meat inspection

Control of agency of transmission
1. Feces, urine, Vomitus
2. Fly control
3. Miss Sanitation
4. Proper washing of hands
5. Water purification

c. Proper handling of milk.

Specific Diseases

1. Food poisoning
   a. Staphyloccic (Food handlers' boils.)
      (not destroyed by heat.

2. Salmonella.
   a. Cause infection in tract.
      1. Germs.
      Diarrhea

3. Botulism
   a. Caused by anerobic germs
      spore forming germs.
      1. Home canned foods.
      2. Central Reserves System.

HPD #6

Insect Borne Diseases

Sources.

I
- Cases
- Carriers
- Animals
- Insects

Agents of Trans.

1. Insects.

II Control

1. Recognize case early prevent them from being bitten by mosquito.
2. Visitory rats and fumigation.
3. Control ticks by dipping sheep etc.
3. Control mosquitoes by destroying breeding grounds.
4. Susceptibles – immunize, clothing. suppressive treatment.

Specific Diseases

1. Mosquito
   a. Malaria – Protozoa – Enosphilco
   b. Yellow Fever – Virus – Aedes Mos.
   c. Dengue Fever – Culex Virus
   d. Filariasis – Worm – Culex Mos.
2. Ticks
   a. Rocky Mtn Spotted Fever – Rickettsia

b. Tularemia – Bacillus
c. Relapsing Fever - Spirochete
d.

3. Mites
a. Tsutsugamushe – Japanese River Fever
b. Scrub Typhus – Rickettsia

4. Lice
a. Typhus - Epid. – Rickette
b. Trench Fever – "
c. Relapsing " – Spirochete

5. Flies
1. Tse Tse Fly
a. Trypanosomiasis
2. Deer Fly.
a. Tularemia – Rabbit Fever – Bacillus
3. ~~6~~. Sand Fly.
a. Mediterranean Fever – Virus
b. Kala-azar
c. Dengue – Virus
4. Fleas.
a. Bubonic Plague – Bacillus
b. Pneumonia " Bacillus
c. Typhus " Rickettsia

HPD # 11 Pneumonia

Acute infectious disease
Caused – Pneumococcus
Characterized by a massive inflammatory exudate into one or more lobes of the lung.

33 types pneumococcus typed.
I to VIII common
I. Young people — II Best serum
III Old " — III Worst "

Pneumonia Cases
1. Laborers – exposure
2. Alcoholics.

Pathology
1. Consolidation of lung.
a. Asphyxia
b. Toxemia

Symptoms
1. Chill
2. Cold – [illegible]
3. Pain in chest – Pleurisy
4. Temp – 103° – 104°
5. Cough – dry – then day later bloody sputum "prune juice", purulent
6. Dyspnea

a. Expiratory grunt.
7. Herpes - Fever blister
8. Cyanosis - Blue color.
9. Nervous System
a. DT's
10. G.I symptoms.
11. Distention

Signs.
1. Fast full pulse
2 Splinting of Chest.
3. B.P. Below 100
4. High WBC 20,000 to 25,000

Course of Pneumonia.
1. Crisis - 5-10 days symptoms gone
2 Lysis - gradual decline.

Complications
1. Empyema - Pus in Pleura cavity.

Treatment.
1. Symptomatic.
a Mustard plaster
b. Strap Chest
c. Codeine
d. Enema

Oxygen
Catheter 15% - Tent 60% concentration
Mask - 90%

Specific Treatment

1. Serum 30 - 15%
2. Sulfa drug 15% - 5%
   a. Sulfadiazine
      Gm IV Gm I

Bacterial infection

1. Pneumonia
2. Streptococcic
   a. Scarlet fever
3. Pneumonic Plague
4. T.B.C.

#7

HPD Louse Borne Diseases

I. Trench Fever – Shin Bone Fever – Rickettsia's
4 days to 3 weeks infected.

II. Symptoms
1. Elevation of Temp.
2. Chills
3. Headache
4. Pains in muscles & legs.
5. Rash
No Deaths
85% return to duty in two months.

III. Symptomatic Treatment
1. Keep in bed, warm
2. Aspirin for headache
3. Aperture, urine should be

IV. Typhus – Rickettsia
1. Epidemic
2. Endemic – Murine
Spread by louse – Reservoir – Rat,
a. Small wild animals.
1. Feces of Louse
2. Urine of Rats.
Symptoms.
1. Incubation period – 8-12 days

2. Chills + fever
3. Back pains.
4. Rash. - Prominent - Measles

Course of disease
1. Fever 5-10 days
2. Fatal cases die within week
3. Nervous system
   a. Twitching
   b. Convulsions
   c. Coma

Prognosis
1. Epidemic - 50-70% die
2. Endemic - 1%

Treatment
1. Vaccine - 4-6 months

Relapsing Fever — Tick Fever - Spirochete
Foreign Borne -
Small animal - Reservoir
Pain in back & joints.

Prognosis.
Runs its course.

Treat with arsenic. 1 shot.

Delousing - .0% DDT
45 min. 60° Méthyl ~~[illegible]~~ Bromide.
STEAM Berbian Barrel
Impregnated Cushing.

H. P. D.

Diet.

I. Calory – Unit of Heat.

10. calories ~~per~~ per lb. per day at absolute ~~at~~ rest.

12 calories = per lb. per day at Hosp. rest.

15 " = " " " " Light Work.

18 " = " " " " moderate "

22 " = " " " " Heavy "

P } ¢ calories per gm

C }

F = 9 " " "

P = 70 gm per day

II. Minerals.

1. Iron – manufacture R.B.C.

a. meats.

b. Whole Cereals

2. Calcium } 1 pt. milk give all needed.

3. Phosphorus }

III. Vitamins

A – Prevent night blindness – keeps mucous membrane healthy

1. Butter, cream, carrots. Cod liver oil.

Diet

1. Nourish patient well
2. Fit requirement of disease
3. Be appealing to patient.
4. In form that patient can take.

Common Hosp. Diets.

1. Liquid Diet. – Milk, broth, Tea
   Used in convalescents. – Cod Liver oil
2. Soft Diet – soft low residue food.
   soft egg. Cooked cereals, toast, crackers.
3. Light Diet. – add ~~scraped~~ meats, fish, fowl – Convalescents.
4. Regular diet.
   Scientifically balanced diet.

II 5. Special Diets. – Ulcer
   1. Sippy diet.
      3 oz. 1/2 milk 1/2 cream
      Alkaline Powders,
      Yeast, Cod Liver oil, Juices.
6 Convalescent Ulcer diet.
   add Soft diet to Sippy diet.
7. after 3 months, fish, scraped beef –
8. Inter Constipation Diet.
   Cooked fruits, and vegetables

coarse cereals and coarse breads.

High Calory diet.
Much calories
Low Calory diet
No Calories.

D – Cod liver oil, – Bones and teeth
Ultra Violet Ray.
E – Anti-sterility. – Wheat. Germ Oil.

B-Complex – Yeast, Lean meat.
Vegetables.
B_1 – Neuritis – Keeps nervous
system healthy.
B_2 – Similar to Vitamin A. Eyes
and mucous membrane.
Niacin – Pellagra preventative.

Gonorrhea

70% of Prostitutes infected with G.C.

Acute discharge from penis.
Diag: Smear, culture.
Gonococcus - Diplococcus.
Gram staining.
Alcohol will cause gonorrhea to thrive.

Diag: ¼ dis: not due to gonorrhea

Incubation Period - 3-5 days.
Prophylaxis - abstinence, Condom
1. Examine penis. No Sores.
2. Urinate and wash hands ~~c~~ c
3. Wash genitals ~~c~~ c with soap + water.
4. Injection 2% Protargol. 4cc
5. & hold for 5 min.
5. 30% Calomel ointment into genitals 3 min.
6. Pressing + hrs. do not urinate for 4 hrs.
7.

Treatment:

Sulfathiazole – sulfadiazine
XV gr. 4 x day – 5 days.
wait 5 day.
Heat Fever.
Penicillin

Two glass test

3 negative smears a week apart.

Tests for cures. Alcohol, Sexual excitement.

Complications

1. Epididymitis.
2. Arthritis
3. Prostatitis
4. Meningitis
5. B.C. of rectum.
6. Ingrowing Carcinoma
7. Stricture.

Syphilis (Lues)

Treponema pallida (Dark Field).
10% of population have syphilis.
2/3 of patients never have symptoms.
Most variable disease known.

Stages.

1st Incubation — primary — 10-60 days.
2nd. Invasion — Secondary 6 wks-6 mos.
3RD Latent Syphilis — months-2-3 yrs.
4th Late Syphilis — tertiary — 3 yrs-25 yrs.

a. Break of joint
b. Ocular
c. Cardio vascular
d. Aneurysm
e. Neuro syphilis
f. Paresis
f. Tabes dorsalis

Diag.

Kahn Test
Wasserman "
Kline
2 Positive tests.

False Positive.
1. Malaria
2. High Fever
3. Jaundice.
4. Leukemia

Treat:
Bismuth — Mercury
Iodide.
Arsenic Preparation.
Trypaesamine
Intravenous - Napharsene

Fever
Malaria
5 day Treat.
Penicillin

Spinal Fluid Examination

Prognosis

Tropical Diseases

I Yaws – Spirochetes
1. Breaking out of skin
a. Africa
b. S.E. Asia

II Rat Bite Fever – Spirochete

III Sodoku Fever – Spirochete
1. Bite of wild field mouse

IV Leprosy – Bacillus

V Yellow Fever –

VI Ringworm – Fungus

VII San ~~Juan~~ Joaquin San Juaquinn
a. Dust is cause
b. Infecting lung.

50 questions

25 T or F.

10 - Diseases and agents of transm.

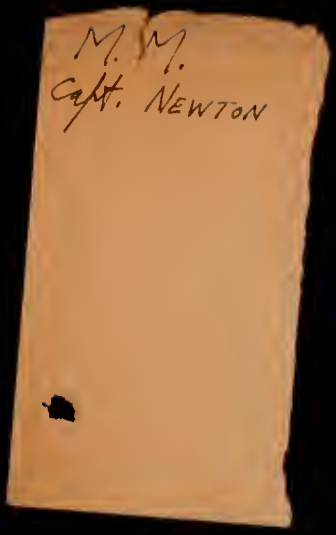
T - F Yellow

Mosquitoes like to breed in water.

Infectious diseases not contagious

Malaria	Smallpox
Pneumonia	Typhoid
Typhoid	Cholera
Cholera	Pneumonia

Virus, Bacteria, Protozoa!


M. M.
Capt. NEWTON

Lec. I

Materia Medica

I Definition
Study of substances used in treating sick
1. Drugs
2. Serums
3. Vaccines
4. Extracts of organs.

II Sources
1. Minerals – acids, alkalis, salts.
2. Vegetables
3. Animal

III Preparations
1. Solid – internally
a. Extract
b. Powders
c. Pills – round
d. Capsules – gelatin
e. Tablet
2 Solids for external use
a Ointments
b. Plasters
c. Suppositories – anus
3. Solutions – Internal
a. Fluid extract
b. Tincture – 10% in alcohol

c. Spirits – weak solution in alcohol.
d. Syrups
e. Elixer – more flavor.
4 Solution – external use
a. Liniments
b. Emulsion – fine drops of fat in solution.

IV Active principle of drug.

V action of drugs.
a. Local effect
1. Soothing, irritant effect.
b. General effect (Systemic)
1. Absorbed
a. Mouth
b. Injection
2 Elimination – excretion
3. Idiosyncrasy – unusual action
4. Cumulative effect

VI Classify Drugs.
1. Systemic – General effect
a Increase activity – stimulant
b. Decrease " – depressant
c. Injure – irrit.
2. Specific Drug – quinine – malaria
3. Local Remedies – External application
a. Astringent – Check secretions – Dry tissues
Zinc, Bismuth

B Irritation – draw blood
combs. is irrit.

→ Caustic – acid alkaline

4. Antiseptic – Iodine
5. Demulcent – Soft. on skin
cocoa butter, glycerin.

Materia Medica MM2

I Antiseptics

A. Action:

1. Chemical Combination - Phenol
2. Liberating oxygen - Peroxide, Dakin's Sol
3. Eliminates food substances necessary for life of germ.

B. Selective action; acts on one particular organism.

C. Classification:

1. Wounds
   a. Mercury Compounds (Merthiolate, Metaphen.
   b. Hydrogen Peroxide 3%
   c. Dakin's Solution - Sodium hypochloride, - [illegible] Dakin Treat, Burns skin.
   d. Potassium permanganate - [illegible] 3% solution.
   e. Gentian Violet - 3% sol - Staph
2. Skin preparation
   1. Mercury - Merthiolate
   2. Iodine - 3-7% Solution.
3. Hand [illegible]:
   1. Alcohol - 50% - 70%
   2. Lysol - Phenol ½%

4. Instruments
 a. Lysol
 b. Formalin – 4%
 c. Phenol (Carbolic acid) 2-5%
 d. Mercury [illegible] – [illegible]
5. Mucus membranes.
 a. Boric solution [illegible]
 b. Dob[illegible] solution (Durge?)
 c. Argyrol 10-25% – [illegible]
 d. Merc[illegible]ate – [illegible]
6. Genito-Urinary.
 a. Mouth – Urotropine
 b. Mandelic acid
 c. Bladder irrigation
  Acriflavin – 1-5000
  Silver Nitrate – 1-5000
7. Sheets and Clothing
 Cresol, Lysol, Formalin
8. Rooms ― " " "
9. Excreta
 Phenol 2.5%
10. Antiseptic powder
 Iodoform, Aristol
11. Blood

MM 3

I Methods of Administration
1. Oral
2. Par Enteral

Effect of Drug. 1. Method of admin.
2. State of drug
3. Case with which dosage is measured.

II Local - Direct application
1. Solutions - Antiseptics
a. Continuous bath.
B. Wet dressing, open, closed
c. Douches
D. Mouth washes
2 Liniments
A. Witch Hazel - Soothing
B. Irritant
3. Ointments - Nupercaine
4. Poultices + Plasters - Irritation (Mustard)
5. Powders - Sulfa - Aristol, Bismuth.
6. Suppositories - Opium - Belladonna
7. Tampons - Pack

III General Effect
must enter blood stream
1. Intravenous - 2 min - adrenalin
a. Venidysis - incision

B. Intracardiac – Adrenalin – 2 cc
C. Intramuscular – 8 min. – Serums Bruscelin
d. Subcutaneous – 20 min – 30 min.
e. Intraspinal – 5 min. – Anesthesia Bruc.

IV Rectal Medical was.
a. Retal – Enemas – 50
1. Flushing
2. Absorbtion – Nutrient enema
Murphy drip.
B. Inhalation.
1. Cubeb
2. Stramonium
3. Tr. Benzoin
Croup Kettles
C. Insufflation. – snuffing
d. Inunction – Salve.
e. Vapor –

MM #4

I Narcotics & Opiates

Depress
1. Narcotic - a drug which relieves pain and produces sleep.
2. Opiate - drug containing opium
3. Analgesic - relieves pain.
4. Sedatives - relieves nervousness.

II Opium - 22 components. 10% of is morphine

EFFECTS
1. Relieve pain.
2. Produces sleep.
3. Slow breathing
4. Decreases all secretions except sweat.
5. Checks peristalsis.
6. Contracts pupils.

III Idiosyncrasies
1. Ill
2. Wild
3. Vivo

3 gr. are to be fatal.

Poisoning
1. Coma
2. Slow Br.
3. PP pupils
4. Cyanosis

5. Slow pulse
6. Profuse Sweating.

Treatment of Dope addicts
1. Quick Change
2. Slow " "

Uses.
1. Pain
2. Sleep
3. Colic (Pain)
4. Prep for anesthesia.
5. Chicky diarrhea
6. Check Cough
7. Break cold. (Doveri
8.

Preparations
1. Doveri powders
2. Powdered Opium
3. Pantopon gr. ⅓
4. Paregoric — Colic of baby's (Camphorated tr. of opium)
5. Morphine Sulfate M.S.
6 Codiene:
Not so much sleep, to relieve pain
usually given by mouth. gr. - ½ - 2

Does not affect breathing.
Better for cough.
Not habit forming.

7. Heroin: Illegal to manufacture.
8. Cocaine - not Opium derivative.
Leaves of Cocoa plant.
Used for eye surgery. - Skinner.
a. Dilates pupil.

AM #5 Sedatives + Hypnotics

1. Sedatives - Relieve nervousness.
2. Hypnotics - Produces sleep.
3. Analgesic - Relieves pain

I Sedatives

1. Bromides
   a. Salty taste
   b. Absorbed quickly from stomach.
   c. Lessen activity of nervous system.
   d. Bromides eliminated in sweat.
      1. Poisoning
         a. Pimples
         b. Loss of petite
         c. Constipated
         d. Salty taste
         e. Bad breath
         f. Stammering speech
         g. Poor memory
         h. Slow Pulse
   2. Use of Bromides.
      a. Prevent Convulsions
      b. Prevent twitching of muscle
      c. D T's
      d. Spinal Sedative
      e. Decrease heart action.
      f. Sleep.

3. Preparations
   a. Sodium Bromides } 15 gr.
   b. Triple Bromides }
   c.

II Hypnotics
   1. Barbiturates
   2. Sulfonal
   3. Paraldehyde + Chloral Hydrate

Poisoning
   1. Stupor
   2. Subnormal Temp.
   3. Profuse Sweat
   4. Low B.P.
   5. Weak irreg. pulse
   6. Stertorous breathing (Heavy)
   7. "Cheyne-Stokes" irreg. Breath.
   8. Cyanosis

I. Barbiturates
   a. Barbitol (Veronal) ⅂ gr.
      1. Produce sleep
      2. Nervousness
   B. Phenobarbital (Luminal) ⅂ ||| gr.
   c. Allonal
   d. Sodium Amytol ||| gr.
   e. Nembutol 1½ gr.

f. Alurate (Liquid) 1 tsp
g. Chloral Hydrate (XX - 13
h. Paraldehyde. 1 tsp. - ½ ʒ

M.M. #6

Cathartics

I Any Lapatives
1. Stimulate muscles of intestine.
1. Filling gut up.
2. Irritation of lining
3. Drawing fluid from tissue into gut.

II Classifications of Cathartics
1. Laxative – mild
2. Purgative – Stronger – Mercurial – Saline Veg
3. Drastic Purgative – Castor oil.

III Laxatives
a. Foods – Bran
b. Mineral Oil – Lubrica +
c. Agar – Iaor – Bulk
d. Psyllium Seed – Bulk
e. Cascara
f. Phenolphthalein

IV Purgatives
1. Calomel ¼ gr. 15 min + 8
a. Follow with another purgative
b. Soda
c No Fruit Juices.
2 Castor Oil. – (Ol Recini) 1 ⅓
3. Rhubarb Extract
4. Aloe – Aloin Pills

5. Senna — Leaves Powd.

Hypo 6. Physostigmine — Gas distress

7. Pitressin

Saline Purgatives

1. Saline — Mag. Sulfate ℥j

Mag. Citrate ℥j

Sodium Phosphate

All Given on empty stomach.

Test on M.M.

Analgesics
Hypnotics
Injection [illegible]
Morphine. Why used - [illegible]
4 reasons.
Codeine - Const
difference. constipation
General effects of Medicine

Where origin of Medicine
Catharthics

Belly Injuries

Morphine not to [illegible] together

Fecal Impaction - Mass of Fecal material. Hardened

M.M. Stimulants

I Drugs which increase activity heart and breathing.

1. Digitalis — heart Stimulant. (48 hrs.)

Action — Vagus nerve. — Slows heart.

a. Increases filling of heart.

b. Increases rest period.

SOB improves

Cyanosis Clears up.

Slow pulse regular

Increased urine output

Edema disappears

Digitalis Poison. — Atropine.

1. Slow pulse 60

2 Nausea + Vomiting

3. Diarrhea

Therapeutic Uses

1. Heart Failure

Types of drug.

Powdered leaf gr. 1½

Tincture 1cc

Dosage by body weight. ½ per 10 lbs.

2. Coramine — hypo. 1cc ampules.

1. Stimulates heart + Resp.

a. Shock
b. Anesthetic Collapse.
c. Morphine poisoning
d. Sedative poisoning.

3. Metrazole
1. For patients in mental diseases

4. Camphor.
1. Resp. stimulant.

5. Strychnine — $\frac{1}{60}$ — gr.
1. Cardiac stimulant.

6 Adrenaline — Epinephrine. Hypo. 1 cc Fast
a. Raises blood pressure.

7. Ephedrine — Mouth — Slow. $\frac{1}{8}$ - $\frac{3}{8}$ gr.

8. Benzadrine — X mgm 2 doses.

9 Alcohol — Reflex stimulation,
Ammonia —
aromatic spirits of $\frac{1}{1}$

Cardiac	Resp.	Reflex
Digitalis	Caffiene	Alcohol
Coramine	Camphor	Ammonia.
Adrenaline	Strychnine	

M.M.8 Sulfadiazine – Penicillin.

1. 1934 – Prontosil Sulfanilamide
1936 – Sulfathiazole
Sulfadiazine
Sulfamerazine
Sulfaguanadine
Sulfasuxidine
Promin.

Action of Sulfa Drugs
1. Absorbed rapidly by mouth.
2. Must be given constantly.
3. Absorbed quickly by peritoneum.

Excreted
Liver and kidneys.

Specific Drug.
Strept. – diazine – sulfonilamide
Staph – Sulfathiazole Sulfadiazine
G. C. – Sulfathiazole "
Pneumo – "
Meningitis

Questionable Value.
Malaria
Cholera
Plague

No Dose.
1. Cold.
2. Influenza
3. TBC
4. Syphylis
5. Rheum. Fever.
6. All Contagious

"Lag" Period - 6 hours after injury increased to 18 hours.

Toxic Effect
1. Irregular
2. Sulfapyridine - deaths.
3. Cyanosis
4. Nervous signs
5. Nausea, Vomiting, diarrhea.
6. Headache, dizziness, ringing of ears.
7. Drug Fever.
8. Skin Rash
9. Jaundice.

Blood count every 3 - 4 days.

Anemia
Leukopenia
Bloody Urine
Arthritis
Eye Disturbance

Treatment.
1. Force fluid.
2. Alkalinize.

II Penicillin.
1. Staph, Strept, Pneumo
D.C., early Syphilis, meningitis
Sac. Bacillus.
2. Stored Cold. 100,000
10° Cent. stored.
Expire after 3 mon.
Dissolved in water, glucose.
3. Used Intramuscularly.
600,000 24 hrs
100,000 — 5 million.

M. M. 9 Anesthesia

Analgesia – Absence of pain
Anesthesia – " " all sensation
General " – " " " unconsciousness.

Stages – Induction, light, Surgical, overdosage
Signs – Sensory, motor, respiratory, eye Circulatory
Overdose – dilated pupils, shallow breathing. Cyanosis.

Sodium Amytol } BT
Nembutol }

2 hrs. before O.R.

~~B.T.~~ PRE Op.N
Morphine – 1/4 gr. } 1 hr.
Atropine – 1/150 gr. }

Agents – Ether – Open Drop
Wet Towel – Closed
Intra tracheal, tube
Colonic (in oil)
Chloroform
Ethyl Chloride – Local anesthetic

Nitrous Oxide – 5 to Partially asleep.
Ethylene – Quick
Cyclopropane –
Rectal Anesthesia
1. Avertin
a. Basal Anesthesia
Initial – IV
Sodium Pentothal. IV

Regional Anesthesia
1. Nerve Block.
a. Novocaine (Procaine)
Field Block ⟨0⟩

Caudal Block – Procaine – Nupercaine
Topical – Butyn Pontocaine, cocaine
Spinal Anesthesia – not in Shock
1. Procaine, Nupercaine, Pontocaine.
2.

M M Poisons + Antidotes

Toxicology - Substances which harm the body by chemical action —

I Local - Skin burn or eruption.
Mucous membrane - burn
G. I. - Pain, vomiting, diarrhea.
Iodine, Acid, Alkaline.

II General Effects - Atropine, Tr. Belladonna

1. Physiologic Symptoms -
Collapse - Like shock.
Opium
Atropine
Alcohol
Strychnine

2. Mixed
a. Phos.
b. Bichloride
c. Arsenic
d. Phenol

Treat. of Poison:
1. Remove poison
2. Protect tissue + prevent absorption

3. Antidote
4. Treat Collapse
5. Emetic
    a. mustard
    b. Soapy Water
    c. Copper Sulfate
    d. Apomorphine - subcutaneous.
6. Laxative

Demulcent
1. Milk
2. White of egg
3. Starch + water

Antidotes ——— Chemical
Precipitant — Tea Leaves
Potassium Permanganate
Physiological — Counteract

Malaria

M.M. Last — Quinine

Quinine, Atabrine, Chloroquin.
Quinine Sulfate
1. All tissue is effected.
T.Q.S. - 1. Stimulant
2. Depressant.
Tertian - 48 hrs
Quotan - 72 hrs.
Drug only effective when cells rupture.
Quinine Eliminated through Kidneys.
Chronic cases
1. Rash (Hives)
2. Scanty Urine (Bloody)
3. Slow Pulse

Poisoning
1. Ringing of Ears
2. Dimness of color vision.
3. H.A. Nausea Vomiting.
4. Slow Pulse

Uses of Quinine:
1. Colds

Suppressive treatment:
1. X gr. every evening.
Active — XV gr. 6 days & 5 doses

Severe: Quinine Hcl. gr. X 300 cc
salt solution - repeat every
six hours.

1. Severe
2. Intolerant to Atabrine.
3. Frequent relapses

Atrabrine.
Toxic: Yellow Color, Nausea, Vomit.
Prevent. - Soda - sweetened drink.
Suppressive: 1½ gr. a day, weight dim.
¾ gr
Active - 3 gr every 6 hrs. x 5 doses
1½ gr. ℥ x 6 day -
Severe - gr. 3 in 5 cc IV
Plasmochin. — — — —

W.M. Administration

I Admitting Patient to Hosp.
1. All persons on active military duty.
a. 4 Branches of services
b. Women branches
c. Allied soldiers
✓ 2. PW's and garrison prisoners.
3. Veterans
4. Civil Service employees, civilian personnel and dependent of service men. Optional on part of C. O.
5. Anybody in emergency.

✓ Ambulatory
Litter
Patient admitted at receiving office
1. Admitting Officer
✓ 2. MED. 55. [illegible]
3. T.P.R. - Assist officer
4. Get information for 55
4 copies 2 original 2 onions.
2 original to Wd.
1 - onion skin to information desk.
1. at receiving office for A & D sheet
1 Bed card
In case of serious illness, patient

Pg. 2

may be taken to ward for information.
5. Property tag MDF 76 and value
a. Make 3 forms - if none make 1
1. You, patient, admitting officer signs it.
6. PW's admitted must get in touch with Med. O.D. and Adm. O.D.
4 valuables on slip: prisoners.

Lec. II
Ward Personnel
MDF 75 Patients property card.
1 Clothing washed and disinfected before storing - or exchange.
2. [illegible] patient other in hosp. Records
Heads of Ward.
1 Ward Officer - Ward supervisor MD
2. Head Nurse " Receives and carries all
2. orders for treat of patients.
3 Keeps all records of patient.
4 is in charge of medication and treat.
5. Food
6 [illegible] medicine cabinet stocked
III Ward Nurse
IV Ward Masters

History of patient what condition was when admitted treatment when in hosp. condition in hosp. & condition when leaving hosp

a. [illegible]
b. [illegible]
c. [illegible]

LECTURE III

[illegible] 55 series.

55 B – Chief Complaint
55 C-1 – Physical Exam
55 E-1 – Consultation Request
55 E-2 – Opthalmologic Exam.
55 E-3 – E, N.T.
55 E-4 – Dental Exam
55 E-6 – Proctoscopic Exam.
55 E-7 – Urologic
55 E-9 – Allergy exam
55 F – Progress notes
55 G-1 – Treatment
55 G-2 – [illegible] Record
55-H1 – [illegible] Treat.
55-H2 – Temp. Graph.
55 J – [illegible]
55 K1 – Radiologic Record
55 L – Blood, Urine, Tests.

1. Large Laparotomy Pack - 45 min.
2. Assorted Packages of gowns, sheets, towels
   — 30 min.
3. Solutions about $\frac{2}{3}$ full
   1 Liter — 15 min.
   2 " — 20 "
   3 " — 25 "
   4 " — 30 "
4. Rubber Goods, Gloves + Tubing
   Utensils - basins, pitchers, beakers } 15-20 min.
   Instruments
   Powders + ointments — 1 hr. 320° F.

W. M.A. # 2.

Procedure of cleaning - [illegible]

1. Soaking in [illegible] solution
2. Wash in cold water
3. " " Soapy "
4. Test for leaks and tears
5. Dry thoroughly.
6. Powder.
7. Wrap in 2 thicknesses of [illegible]
8. Insert Powder pads.
9. Mark outside of [illegible] - glove size, new used [illegible]
10. Date of sterilizing - initial [illegible]
11. Autoclave [illegible]

Fanfolding. - For steam to penetrate
320° F. 1 hr. oils + powders.
Linens drums - 30 - 40 min
Packages.
Hand instrument - 15 - 20 min

34

Sterile Tech. what it is

4
9
16
8
3
1
4
6
10
76

W.M.A.

2

Care of Wounds

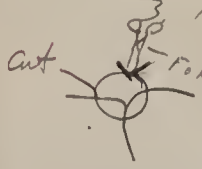
I Purpose of Dressing
1. Protect wound
2 Compress
3. Absorb fluid
4. Medication
5. Packing
6. Keep from spreading.

II Change dressing only when needed.
a. When draining. change
b. When dried " "
c. Burn - 2 - 6 weeks
Change dressing when no other thing is done.
d. Easy dressings done first.
e. Change dressing on aseptic wounds first.
f. The principles of aseptic nursing carried.

III Way to remove a dressing.
1. Around leg bandage cut [illegible] from wound
2. Adhesive tape removed by pulling towards wound. Benzine - Ether
3. Sticking Bandage
4. Hydrogen Peroxide
6 Saline Solution

c. Remove tape gum
d. Clean area with alcohol sponge
rub away from incision.

Apply new dressing.
1. Apply with sterile forceps.
2. When taped shave hair.
3. Tincture of Benzoin;
a. Makes tape stick.



Dressing.
□ - 4 by 4 - Flats - Sponges.

Use ~~dressing~~ sponge to wall off viscera
when doing a laparotomy.
Laparotomy Pad = 1

Alcohol sponge - Cotton sponge.
a. Fluff
b. Pledget

NANDA
NANDA

Duties of Circ. Tech and Scrub. Nurse.

1. Cir. Tech. takes articles from unsterile field to sterile field.

2. Scrub Nurse — Instrument Nurse sterile Nurse
   a. Duties
      1. Responsible for necessary supplies for all operations.
      2. Setting up sterile Tables.
      3. Responsible for instruments, sutures and needles.
      4. Draping for Operation.
      5. Care of sharp and special instruments.
      6. Sponge Count.

3. Circulating Technician.
   1. General Knowledge of Opn. Room and Terminology.
   2. General Cleaning of floors, instrument and equipment.
   3. Folding Linens for sterilization.
   4. Making Dressings and Supplies.
   5. Operating Sterilization equipment.
   6. Cleaning of Operating field.
   7. Placing patient on Operating table.

8. Set up the scrub room.
10 2. Circulating techs on call for surgery.
9. Paging doctors and scrub nurses.

After eath Procedure

Call Med. O.D. in case of death during night.

Equipment - Bandage, cotton, Tags, Towels. 2 sheets.
Notify Chaplain.
Screen off patient.
Give bath.
Close all natural openings.
Tie patients mouth closed.
" " arms over chest.
" " Legs - above knees - ankles
Take all jewelry off patients
Cards go on thumb of rt. Hand, big toe rt. foot.
Name, Rank, ASN, O.D.s name, description
Wrap sheet over body tag on head of sheet.
Property change
Make note on patients' death.
Prepare area or room for next patient.

Ward Sanitation.

1.

Public Property & Supply.

1. Medical Supply Catalogue

1. I - Drugs, chemicals, Biologicals (1.5 and over)

Starting No.s II - Surgical dressings.

III - Surgical Instruments.

IV - Laboratory Equipment

V - Dental Equipment.

VI - X-Ray Equipment.

VII - Furniture, office Supplies, MOF's.

VIII - Veterinarian - Veterinarian

IX - Field Equipment - MD Chest

If expendable allowance for 6 no.
If non-expendable " " 1 yr.

~~UNIT~~ NO.	NOTES	~~UNIT~~ ITEM	UNIT	UNIT PRICE	ALLOW/1000	
300	NON-EX.				.5	
2	EXPEN X					
1	EXPEN. S.G.					
	SUPERVISED ITEM S					
	LAB. ONLY L					
	D. LAB. D.L.					
	REPLENISH R					

Accountability and Responsibility
" " for public property
rests on any person who
who has in his possession property for issue or
storage or who have property held
by others on memorandum receipts
and who is required to maintain a stock
record account for this property,
called the property officer or accountability
officer. Officers having property or
memorandum receipts are called
responsible officers and are not required
to maintain a stock record account.
Any person in military service having
public property in his possession is responsible
for that property.

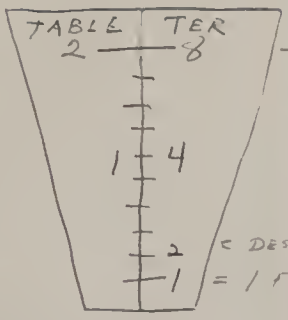
Admitting Officer
C.D. at night

Who may be admitted to Hosp.
Necessary data for 55 A.

Personal effect slip
MD 54 A
Money + Valuables

Sent

F. Cent.



= 1 Fl 3 = 15 cc

= 1 Fl 3 = 4 cc

FAHRENHEIT — CENTIGRADE

? $F = \frac{9}{5}C + 32$ When cent. temp. is known

$212 = \frac{9}{5} \times 100 + 32$

$C = \frac{5}{9}(F - 32)$ When F. temp. is known

$100 = \frac{5}{9} \times (212 - 32) = \frac{5}{9} \times \frac{180}{1}$

$100 = = \frac{5}{9} \times (85 - 32)$

$\frac{5 \times 53}{9} = \frac{265}{9} = 29\frac{4}{9}$

$\frac{29}{9\overline{)265}}$

Apothecary System

AVOIR	APOTH	METRIC
437.5 gr = 1 oz.	480 gr. = 1 ℥.	15.432 grains = 1 Gram.

APOTH.

20 gr. = 1 scruple ℈
60 gr = 3 scruples = 1 drachm ʒ
480 gr = 8 Drachm = 1 Ounce ℥
5760 gr = 12 Ounces = 1 lb

AVOIR.

437.5 gr. = 1 oz.
7000 gr = 16 oz. = 1 lb.

Fluids - Volume - Apothecary

60 minims = 1 f ʒ
8 f ʒ = 1 f ℥
16 f ℥ = 1 pt.

Change Frac. to Higher Terms.

$\frac{1}{6} + \frac{3}{4} - \frac{2}{3} + \frac{3}{8} =$

$\frac{1 \times 1}{4 \times 6} = \frac{4}{24}$

$\frac{6 \times 3}{8 \times 3} = \frac{18}{24}$

$\frac{8 \times 2}{8 \times 3} = \frac{16}{24}$

$\frac{3 \times 3}{3 \times 8} = \frac{9}{24}$

$\frac{47}{24} = 1\frac{23}{24}$

$\frac{7}{8} - \frac{2}{5}$

$35 - 16 = \frac{19}{40}$

$\frac{6}{12} \div \frac{3}{6} = \frac{2}{2} = \frac{1}{1}$

$\frac{2}{15} \cdot 5 = \frac{10}{15} = \frac{2}{3}$

$\frac{3}{5} \times \frac{5}{10} = \frac{15}{30} = \frac{1}{2}$

$\frac{3}{4} \div \frac{2}{3} = \frac{3}{4} \times \frac{3}{2} = \frac{9}{8} = 1\frac{1}{8}$

8	1	8	9	11	23	59
4	7	5	8	15	34	80
6	9	4	7	16	84	77
3	6	3	9	19	76	35
21	23	20	33	61	222	44
						93
						393

124	172	821
268	283	372
579	934	694
234	514	453
576	689	575
895	756	696
2676	3548	3611

347
20
34700

Metric System

1. Unit of weight - Gram
2. Length —— Meter
3. Volume —— Liter

1cc of water is a gram.
Liter about a qt.
Meter - 39.6"

Dec.

$\frac{1}{1000}$ = Milli
$\frac{1}{100}$ = Centi
$\frac{1}{10}$ = Deci
1 = Meter
10 x meter - deka
100 x " = Hekto
1000 x " = Kilo

1cc = 1 ml = 1 gram
500 cc = 500 ml = 500gm

Milli.

Abbreviations

Length	Wt.	Vol.
mm	mgm	ml.
cm	Cgm	cl.
dm	dgm	dl.
M	Gm	L
Dm	Dgm	Dl.
Hm	Hgm	Hl
Km	Kgm	Kl

BLECHARCZYK, MITCHEL A.
SEC. A

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MEDICAL AID EXAMINATION: SURGICAL SECTION

COMPLETE SENTENCE -- EACH QUESTION= 5%

1. A closed wound is one in which The skin is not broken.
2. Open wounds should be cleaned with Antiseptics
3. Types of closed wounds are: Contusion, Internal injury, Simple Fracture, Sprain
4. The three most important causes of trouble in wounds are: Hemorrhage, Shock, Infection
5. Vaseline Gauze is used to pack a wound after it is cleaned up.
6. INFLAMMATION is: resistance of the body to infection
7. CARDINAL signs of INFLAMMATION are Swelling Redness Pain Hardness
8. An inflammatory process may spread along Fascia Muscle Tendon blood stream Lymphatics
9. Three local factors which favor wound healing are Aid Wound Stop free bleeding and Cleaning wound
10. Traction is the most important factor in reducing and immobilizing a fracture.
11. An impacted fracture is one in which the broken bones are pushed one against the other
12. An inflammation of the lymph vessels is called Lymphangitis

---

FILL IN -- EACH QUESTION= 5%

1. Types of fractures are: (1) Simple (2) Compound
2. Complications of fractures are: (1) Neurosis (2) Thrombosis (3) Malunion (4) Fat Embolism
3. Signs of fracture are: (1) Crepitus (2) Loss of motion (3) Pain (4) Involuntary motion (5) Deformity
4. Symptoms of a sprain are: (1) Pain (2) Swelling (3) Discoloration (4) Tenderness

---

TRUE OR FALSE -- EACH QUESTION COUNTS 2% (PUT T IN BRACETS FOR TRUE, F FOR FALSE)

1. (F) Morphine is always proper treatment of shock.
2. (F) War Wounds should be sutured.
3. (T) Heat is used to localize an inflammation.
4. (F) A recurrent dislocation is a backward dislocation.
5. (F) An osteoblast is a powerful explosion that will cause a severe perforation wound.
6. (F) One should try for crepitus in a bone to diagnose a fracture.
7. (F) Most war wounds heal by primary intention.
8. (F) An osteoclast is a device used for skeletal traction in the treatment of fractures.
9. (F) Morphine should be given in fractures of the skull.
10. (F) An inflammation spreading along the lymphatics should be opened.

#930

Treat.

1. Dark Room
2. Sedative
3. Use Antitoxin
4. Neutralizes Toxins

MITCHEL A. BLECHARCZYK

MEDICAL AID: EXAMINATION SURGICAL SECTION A

FILL IN THE BLANKS: EACH QUESTION: 5%. 92

1. Hemorrhage is abnormal loss of blood from body
2. Types of hemorrhage are: (3) arterial venous and capillary.
3. Symptoms of hemorrhage are: (4) Anemia Rapid Pulse Rapid Respiration Dehydration
4. Hemorrhage can be controlled by: (4) Elevation Digital pressure Tourniquet Compress
5. General treatment of burns is: (4) Plasma Warmth Morphine Rest + Quiet
6. Complications of burns are: [illegible] & Contraction of skin
7. Four steps in treatment of shock are: STOP Hemorrhage Elevation [illegible] Keep Warm
8. Symptoms of shock are: (4) [illegible] Pulse [illegible] Cold Clammy Skin Patient [illegible]
9. Blood transfusion is given in Hemorrhage & Blood + [illegible]
10. Types of Plasma are Liquid & Powder

TRUE OR FALSE (INSERT "T" OR "F" IN THE BRACKETS)

(T) 1. A clean cut bleeds more than a crushing wound.
(F) 2. A very tight tourniquet causes a wound to bleed more than no tourniquet.
(F) 3. Immersion foot is a frozen foot.
(T) 4. Hemorrhage that begins about a week after the wound is called secondary.
2X (T) 5. Strains should be treated by prolonged rest.
(F) 6. If an ankle is sprained by turning inward it should be strapped in that position.
(T) 7. Boneswhich are not covered with periosteum heal slowly.
2X (T) 8. Shock is due to heart failure.
(T) 9. Primary shock is nervous in origin.
(T) 10. Dehydration aggravates shock.
(F) 11. Artificial respiration should be given in choking gas victims.
(T) 12. Artificial respiration should be given in blood and nerve gas casualties.
(T) 13. 80% of deaths from gas occur within 24 hrs.
(F) 14. Primary shock is often fatal.
2X (T) 15. Strong stimulants should be used in shock cases.
(F) 16. Mustard burns are painful immediately.
(T) 17. Lewisite burns are painful immediately.
(T) 18. In burns the severity depends on area rather than depth.
(F) 19. Serum is blood less the cellular elements.
(F) 20. Plasma is the liquid part of clotted blood.
(T) 21. Blood type "O" is called universal donor.
(T) 22. A person with blood type "O" can give blood to anyone.
(F) 23. In giving dried plasma, blood typing must be done.
(F) 24. Whole blood is better than plasma in shock.
(F) 25. In treating frostbite the skin should be massaged vigorously.

#936

Cpl. Michael A. Bolchaczuk
Co.

~~XC~~ 97/n.d.k.

I 10
8
9
7
5
6
4
2
3
1

II 11. Study of the structure of the body (anatomy)
12 Study of the function of the body (Physiology)
13 Rigor Mortis is hardening of protein in muscles of dead body.
14. Connective Tissue is structure holding body together.
15. All or more - All is muscle fiber not contracting partially but to fullest extent at all times.

III 16 Right Hypochondriac 1 25 Saggital Plane
17 Left Hypochondriac 2 26 Medial Plane
18 Right Lumbar 3 27 Transverse Plane
19 Left Lumbar 4 28 Lateral Plane
20 Right Iliac 1 29 Compact Bone
21 Left Iliac 2 30 Cancellous
22 Epigastric 3 31 Marrow
23 Umbilical 4 32 Periosteum
24 Hydrogastric 1 33 Long Bone

2 34 Short Bone
3 35 Flat Bone
4 36 Irregular Bone
1 37 Cervical Bone
2 38 Thoracic
3 39 Lumbar
4 40 Coccygeal
5 41 — Sacral
1 42 Scapula
43 Clavicle
44 Humerus
4 45 Radius
5 46 Ulna
47 Carpal
48 Metacarpal
8 49 Phalanges
1 50 Innominate
2 51 Femur
52 Patella
4 53 Tibia
5 54 Fibula
6 55 Tarsal
7 56 Metatarsal
8 57 Phalanges
1 58 Frontal
2 59 Parietal
3 60 Occipital

4 61 Temporal
5 62 Sphenoid
6 63 Ethmoid
1 64 Trimubium
2 65 Sternum
3 66 Xiphoid
1 67 Bone
2 68 Cartilage
3 69 Ligament
4 70 Synovial Fluid
5 71 Joint Capsule
6 72 Synovial membrane

IV
1 73 D h
2 74 D p
3 75 D b.s
4 76 S
5 77 A
6 78 D b.s
7 79 D s
8 80 D h

True or False

IV 81 F
2 82 T
3 83 F
4 84 F
5 85 F

6. 86. F
7. 87. T
8. 88. F
9 89 F
10 90 T

1. 91. T
2. 92. F
3. 93. T
4. 94. F
5. 95. F

96. T
97. T
98 T
99. T
100. F

Cpl. Mi[illegible]
[illegible] C

89

1. $\frac{7}{12} = \frac{35}{\underset{5}{60}}$

2 $\frac{144 \div 12}{240 \div 12} = \frac{12}{20} = \frac{3}{5}$

3. $\frac{4}{5}$ $\frac{5}{6}$ $\frac{7}{15}$ = 30 LCD

4. $5\frac{3}{8} = \frac{43}{8}$

5. $\frac{2}{3} - \frac{1}{6} = \frac{4-1}{6} = \frac{5}{6}$ = 3 -1

6. $\frac{9}{5} \div \frac{3}{25} = \frac{9}{\underset{1}{5}} \times \frac{\overset{5}{25}}{3} = \frac{45}{3} = 15$

7. $\frac{5}{8} = 8\overline{)5.000}$ = .625

.625
48
20
16
40

8. $.08 = \frac{8}{100} = \frac{2}{25}$

9. $2.4\overline{)2.88}$ = 1.2

1.2
24
48
48

10. $C = \frac{5}{9}(72-32) = \frac{5}{9} \times \frac{40}{1} = \frac{200}{1} = 22\frac{2}{9}$ C

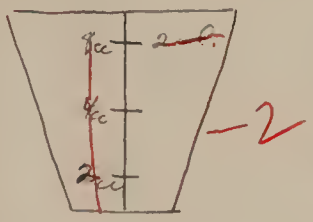
11. $5^\circ C$ to F $= F = \frac{9}{5}(\cancel{25} + 32) = 66\frac{3}{5}^\circ F$ 41

-3

$5\overline{)333}$ = 66

$\frac{9}{5} \times \frac{37}{1} = \frac{333}{5}$

12 .003 Kilogram — 40 grms
4000 Milligram — 13 grms
13 gram — 5

13
1. 

— 2

2. 8 fl drams

14. Meter, Grams, Liter

15. a. Ounce
B. dram
c. Gm
d. gr.

Cpl. Mitchell A. Blecharczyk
Co. C

EXAMINATION ON MATERIA MEDICA:

FILL IN BLANKS WITH APPROPRIATE WORD OR WORDS.

1. Medicines which relieve pain are called ANALGESICS .
2. Medicines which produce sleep are called ~~NARCOTICS~~ HYPNOTYCS
3. Intramuscular injections may be given in the BUTTOCKS or SHOULDER muscles.
4. Cathartics are never given when there is suspected inflammation of the APPENDIX .
5. A drug which relieves pain and produces sleep is called a NARCOTIC .
6. Morphine given by hypodermic injection produces desired effect in about FIFTY THIRTY minutes.
7. Morphine is used to control ~~DIARRHEA~~ PAIN , to prevent SHOCK , and in ~~DIARRHEA~~ DIARRHEA .
8. There is a ~~1/4~~ 1/2 grain of morphine in a morphine syrette.
9. Codeine is weaker than morphine and is frequently used for COUGH .
10. For general effect medicines are given by ORAL , PAR ENTERAL , ~~INTRAVENOUS~~ INTRAMUSCULARLY , INTRAVENOUS .

IF THE STATEMENT IS YES OR TRUE, ENCIRCLE T: IF NO OR FALSE, ENCIRCLE F.

T (F) 11. All medicines are derived from minerals.
(T) F 12. A sedative is a medicine which relieves nervousness.
(T) F 13. Some fluid preparations of medicine are tinctures, syrups, and elixirs.
T (F) 14. Cathartics are generally given on a full stomach.
(T) F 15. Medicines given by hypodermic injection act more quickly than when given by mouth.
T (F) 16. Suppositories are usually given by mouth.
T (F) 17. Narcotics are not habit forming.
T (F) 18. Morphine can be repeated in one hour without consulting the Medical Officer.
(T) F 19. Morphine should not be given in head injuries.
(T) F 20. Round tablets should be taken with plenty of water.
T (F) 21. Morphine dilates or widens the pupils.
(T) F 22. In caring for a wound the first thing to do is to control hemorrhage.
(T) F 23. Intestines protruding from an abdominal wound should not be replaced by the first aid man.
(T) F 24. Morphine should not be repeated when the respirations are less than 12 per minute.
(T) F 25. A diuretic is a medicine that constricts blood vessels.
(T) F 26. Opium compounds has a tendency to produce constipation.
(T) F 27. In hypodermoclysis large quantities of fluid as glucose or saline solution are given subcutaneously.
(T) F 28. Morphine will at times cause nausea and vomiting.

#908

90

Cpl. Mitchell & Blecharczyk
Co. C.

HYGIENE AND PREVENTION OF DISEASE [illegible]: SURGICAL SECTION

TRUE OR FLASE: INSERT "T" IN TRUE; "F" IN FALSE.

(F) 1. An infectious disease is always contagious.
(T) 2. A rod-shaped bacterium is called a bacillus.
(T) 3. Spores can survive unfavorable conditions which would kill ordinary bacteria.
(F) 4. Toxoids confer passive immunity.
(T) 5. A disease is said to be endemic when there are always a few cases in a locality.
(F) 6. Dry sweeping is never done in the army.
(F) 7. The common cold is caused by a streptococcus, and is followed by an immunity of long duration.
(T) 8. Pneumonic plague requires absolute quarantine.
(T) 9. Sulfadiazine will lower the carrier rate for epidemic meningitis.
(T) 10 Staphlococci from persons with boils may produce toxins in foods which are not destroyed by heat and may cause food poisoning.
(F) 11 Streptococci cause only sore throats.
(T) 12 Undulant fever may be aquired from infected animals through milk.
(F) 13 Yellow fever is transmitted by the same mosquito which transmits malaria and is found in the same parts of the world.
(T) 14 Recovery from a disease usually confers an active immunity.
(F) 15 "Typhoid Vaccine" protects against paratyphoid as well as typhoid.
(F) 16 Suppresive treatment with atabrine will prevent malaria.
(F) 17 Germs of intestinal disease leave the body only in feces.
(T) 18 The toxin of botulism acts upon the central nervous system.
(F) 19 A vaccine always contains living bacteria.
(F) 20 The term disease always refers to a venereal infection.
(F) 21 Anaerobic bacteria never cause disease in humans.
(T) 22 Isolation of the case is necessary in most contagious diseases.
(T) 23 Tularemia is also known as rabbit fever.
(T) 24 Pneumonia may be caused by a virus as well as several kinds of bacteria.
(T) 25 The source of malaria is the female anopheles mosquito.

26-35 MATCH AGENT OF TRANSMISSION WITH THE DISEASE IN FOLLOWING:

a. Dengue	(D) Airborne.
b. Rocky Mountain Spotted Fever	(I) [illegible].
c. Typhoid Fever	(B) Tick.
d. Pneumonia	(C) Water.
e. Filariasis	(F) Milk.
f. Undulant Fever	(H) Snow-fly.
g. Botulism	(B) Sheep-bite.
h. Anaerobic Dysentery	(G) Home-canned foods.
i. Malaria	(A) Tsetse fly.
j. Cholera	(H) Hands.

36. Mosquitoes breed in Water.
37. Measles, mumps and chickenpox are all VIRUS diseases.
38. 39. [illegible] diseases caused by protozoa are Malaria and Yellow Fever.
40. 41. Two common systems of pneumonia are CYCOSIS in Pain.
42. 43. Two personal protective measures against malaria are CLOTHING and Mosquito Nothing.
44. 45. All army personnel are immunized against TYPHOID TETANUS and

Cpl. Michael A. [illegible]
Co. C.

10

HYGIENE AND PREVENTION OF DISEASE [illegible] [illegible]CAL SECTION

TRUE OR FALSE: INSERT "T" IF TRUE; "F" IF FALSE.

(F) 1. An infectious disease is always contagious.
(T) 2. A rod-shaped bacterium is called a bacillus.
(T) 3. Spores can survive unfavorable conditions which would kill ordinary bacteria.
(F) 4. Toxoids confer passive immunity.
(T) 5. A disease is said to be endemic when there are always a few cases in a locality.
(F) 6. Dry sweeping is never done in the army.
(F) 7. The common cold is caused by a streptococcus, and is followed by an immunity of long duration.
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(T) 24 Pneumonia may be caused by a virus as well as several kinds of bacteria.
(T) 25 The source of malaria is the female Anopheles mosquito.

26-35 MATCH [illegible] TRANSMISSION WITH THE DISEASE [illegible] FOLLOWING:

a. Dengue	(D)	Airborne.
b. Rocky Mountain Spotted Fever	(I)	[illegible]
c. Typhoid Fever	(B)	Tick.
d. Pneumonia	(C)	Water.
e. Filariasis	(F)	Milk.
f. Undulant Fever	(H)	House-fly.
g. Botulism	(B)	[illegible]-bite.
h. Amebic Dysentery	(G)	Home-canned foods.
i. Malaria	(A)	Tsetse fly.
j. Cholera	(H)	Hands.

36. Mosquitoes breed in Water.
37. Measles, mumps and chickenpox are all VIRUS diseases.
38. 39. The diseases caused by protozoa are Malaria and Yellow Fever.
40. 41. Two common symptoms of pneumonia are CYCOSIS and Pain.
42. 43. The personal protective measures against malaria are CLOTHING and Mosquito Netting.
44. 45. All army personnel are immunized against TYPHOID, TETANUS and ______.

46.-50. [illegible] THE [illegible] CAUSING [illegible] FOLLOWING [illegible] ([illegible], B [illegible] bacterium, P [illegible] protozoa, and [illegible] worm.)

a. Bacillary dysentery	(B)
b. Filariasis	(W)
c. Smallpox	(V)
d. Meningitis	(B)
e. Typhoid Fever	(B)

#932

FINIS

MITCHEL A. SLECK

97

ANATOMY AND PHYSIOLOGY EXAMINATION: SURGICAL SECTION

DEFINITIONS. EACH PART COUNTS 3%

1. Epidermis: is the outside layer of the skin
2. Capillary Loop: is where arterial capillaries meet venous capillaries
3. Erythrocyte: Red blood cells
4. Plasma: Fluid part of blood minus cellular part.
5. Semi-lunar valves: Tricuspid valve between [illegible] Mitral valve
6. Amino Acids: is made by liver from protein for muscle
7. Enzymes: a substance which causes a chemical change but not changing itself. breaking down food
8. ~~Meninges~~ Ejaculatory duct: causes the excreting of seminal fluid in orgasm.
9. Glomerulus: take off fluid part of blood in kidneys making urine
10. Amylopsin: Enzyme changing [illegible] to [illegible], sugar.

TRUE OR FALSE: EACH PART COUNTS 3%

T Serum is whole blood minus cellular elements and fibrin.
T The function of the lymphatic system is to aid our body defense against infection.
T One of the functions of the liver is to salvage hemoglobin.
F The heart contains 4 chambers called ventricles.
F The plumonary artery carries purified blood from the lungs back to the heart and from here it is sent to the various parts of the body.
T Amino-acids are used by the body to replace body proteins and to build body tissues.
T The portal circulation differs from the systemic and pulmonary circulations in that it begins and ends in capillaries.
T ~~The Cerebellum is that part of the brain that influences and moderates muscle tone.~~ The function of kidney is to manufacture and [illegible]
F The urethra is a structure of the urinary system that connects the kidneys with the bladder; it is a paired structure.
F The ilium is the third division of the small intestine.

DIAGRAM ON THE BACK OF THIS SHEET THE FOLLOWING: (EACH COUNTS 5%)

1. The four chambers of the heart and trace the courses of blood thru them and label.
2. The urinary system; label.
3. Male reproductive system; label.

LIST: I Parts of Large Intestines;
- Calcum
- ascending colon
- Transverse Colon
- Descending Colon
- Sigmoid Colon
- Rectum
- Anus
- appendix

II Structure of Reproductive tract in the male:
- Glans
- Urethra
- Penis
- Seminal Vessels
- Ejaculatory duct
- Vas deferens
- [illegible]
- Epididymis - [illegible]

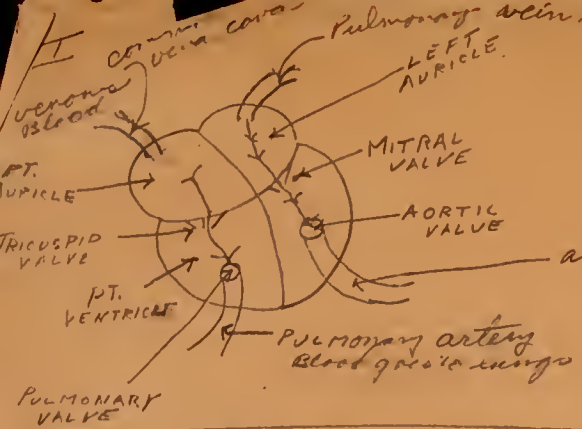
III Arteries of the arm:
- Subclavian
- Axillary
- Brachial
- Radial
- Ulnar
- Hand arteries

IV Parts of the ~~meninges~~: Cardiac cycle
- Inspiration
- Expiration
- Rest Phase

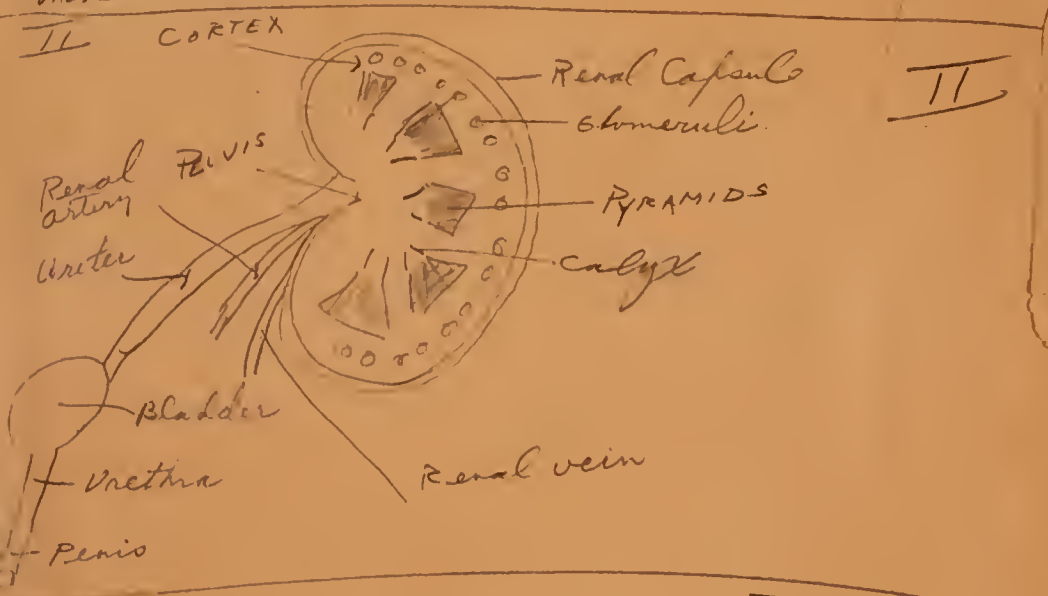
V PARTS OF THE ~~AUTONOMIC NERVOUS SYSTEM~~ SKIN.
- Epidermis
- Dermis

#935

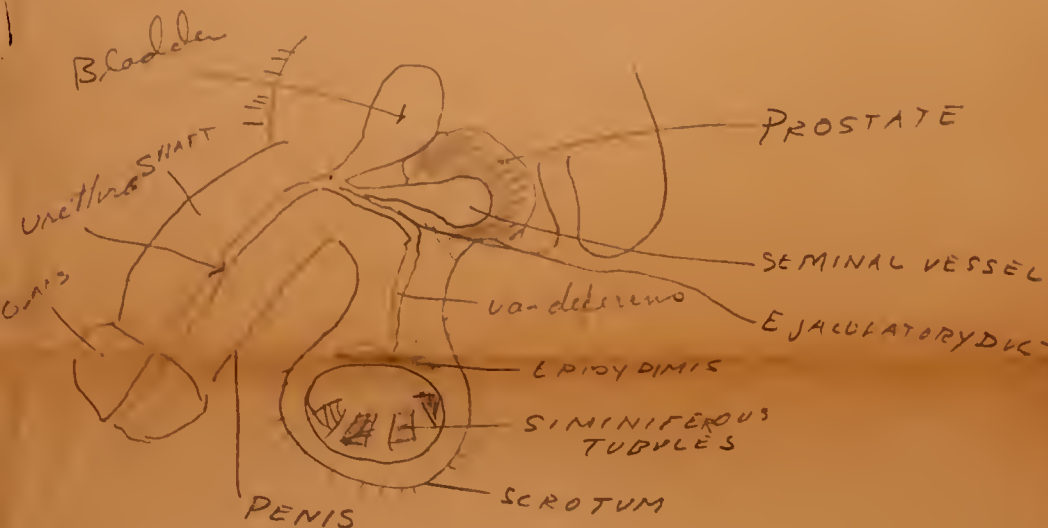
II


Pulmonary vein has arterial blood
LEFT AURICLE
MITRAL VALVE
AORTIC VALVE
aorta - carries arterial blood to arteries.
Pulmonary artery
Blood goes to lungs
PULMONARY VALVE

II


CORTEX
Renal Capsule
Glomeruli
PELVIS
Renal artery
PYRAMIDS
Ureter
Calyx
Bladder
Urethra
Renal vein
Penis

III


Bladder
PROSTATE
Urethra
SHAFT
SEMINAL VESSEL
vas deferens
EJACULATORY DUCT
EPIDYDIMIS
SIMINIFEROUS TUBULES
SCROTUM
PENIS

Surgical Section

I. Introduction

1. Definitions:

a. Medical Terminology refers to the definition of medical words

b. Medical word refers to a word which is usually composed of three principal parts, namely:

1. Prefix -- which refers to one or more letters which come before the root stem
2. Root Stem -- which refers to the mid-part of the medical word
3. Suffix -- which refers to several letters which come after the medical word

Example:

prefix	root-stem	suffix	
peri	card	itis	pericarditis
around	heart	inflammation of	

2. Classification:

a. Medical words may be classified of the following basis, namely:

1. From standpoint of medical aid
2. From standpoint of anatomy

II. The components of a medical word from standpoint of medical aid are:

A. Prefixes, as following:

1. a or an -- from, without
   Example: asepsis, without infection

2. anti -- against
   Example: antisepsis, against infection

3. bi -- two
   Example: binocular pertains to two eyes

4. circum -- around
   Example: circumoral, around mouth

5. dys -- pain or difficulty, bad
   Example: dysfunction, works poorly

6. endo -- within
   Example: endocardium, inner lining of heart

7. erythro -- red
   Example: erythrocyte, red cell

8. e or ex -- out
   Example: excretion, material thrown out of body

9. glyco -- sugar
   Example: glycosuria, sugar in urine

10. hemi -- half
    Example: hemiplegia, one half body paralyzed

11. hyper -- above, excess of
    Example: hypersecretion, too much secretion

12. inter — between, or among
Example: intermuscular, between muscles

13. intra — within
Example: intradermal, within the skin

14. leuko — white
Example: leukocyte, white cell

15. micro — small
Example: microscope, an instrument to see minute structures

16. peri — around, immediately around
Example: periosteum, lining around bone

17. poly — many, much
Example: polyuria, too much urine

18. post — after
Example: postoperative, after operation

19. pre — before
Example: premature, undeveloped

20. sub — under
Example: subcutaneous, beneath the skin

B. Root Stems, these are forms used with a prefix or a suffix, or both to make a medical word. The following forms are root stems:

1. aden — pertaining to gland
Example: adonitis, inflammation of a gland

2. cardi — heart
Example: carditis, inflammation of heart

3. chole — pertaining to bile
Example: cholecystitis, inflammation of gallbladder

4. cost — pertaining to rib
Example: intercostal, between ribs

5. crani — pertains to skull
Example: craniotomy, cutting into skull

6. cyst — pertains to fluid containing sac
Example: cystitis, inflammation of urinary bladder

7. cyte — pertains to cell
Example: erythrocyte, red blood cell

8. derm — pertains to skin
Example: dermatitis, inflammation of skin

9. encephalo — pertains to brain
Example: encephalitis, inflammation of brain

10. enter — pertains to small intestines
Example: enteroptosis, falling of intestines

11. gastr — pertains to stomach
Example: gastritis, inflamed stomach

12. hem, hemat -- pertains to blood
Example: hemorrhage, bleeding

13. nephr — pertains to kidney
Example: nephrectomy, removal of kidney

14. opthalmo — pertains to eye
Example: opthalmoscope, instrument for examining eye

15. ot — pertains to ear
Example: otorrhea, discharge from ear

16. oste -- pertains to bone
Example: osteitis, inflammation of bone

17. path -- pertains to disease
Example: pathology, science of disease

18. pyelo — pertains to pelvis
Example: pyelitis, inflammation of kidney pelvis

19. tox, toxic -- pertains to poison
Example: toxemia, poisoned condition of blood.

20. septic, sept — pertaining to poison
Example: septicemia, poisoned condition of blood.

C. Suffixes, as following

1. algia -- pain
Example: neuralgia, pain in nerve

2. ases, oses -- affected with
Example: leukocytosis, excess number of leukocytes

3. asthenia -- weakness
Example: neuroasthenia, nervous weakness

4. ectomy -- removal of
Example: appendectomy, removal of appendix

5. emia -- blood
Example: glycemia, sugar in blood

6. emesis -- vomiting
Example: hyperemesis, excess vomiting

7. eum -- lining
Example: periosteum, lining about bone

8. esthesia -- sensation
Example: hyperesthesia, extremely sensitive

9. clysis — injection
Example: hypodermoclysis, injection under skin

10. itis -- inflammation
Example: dermatitis, inflammation of skin

11. logy -- science of
Example: pathology, science of disease

12. oma -- tumor
Example: myoma, tumor made of muscle elements

13. ostomy -- creation of an opening
Example: gastrostomy, artificial opening to stomach

14. otomy -- cutting into
Example: laparotomy, cutting into abdomen

15. penia -- lack of
Example: leukopenia, lack of white blood cells

16. phobia -- fear
Example: hydrophobia, fear of water

17. ptosis -- falling
Example: enteroptosis, falling of intestine

18. rrhea -- discharge
Example: otorrhea, discharge from ear

19. trophy -- nourishment
Example: atrophy, wasting away

20. uria -- urine
Example: glycosuria, sugar in urine

III. The important medical words from the standpoint of anatomy are:

1. cell -- a cell is a minute structure which forms the anatomical and physiological basis of life.
2. tissue -- a tissue refers to a group of cells with similar structure and function grouped together.
3. organ -- an organ refers to a group of tissues united together in one unit for the performance of a special function.
4. system -- a system refers to a group of organs associated together to perform several stages of a special function.
5. A viscus (pleural viscera) -- is a hollow organ.
6. anatomy -- anatomy refers to the study of the structures of the body. It is divided in the following divisions:
   a. osteology -- the study of bones
   b. arthrology -- the study of joints
   c. myology -- the study of muscles
   d. angiology -- the study of the circulatory system
   e. neurology -- the study of the nervous system
   f. visceral anatomy -- the study of the viscera of the human body
7. physiology -- physiology refers to the study of the functions of the body and its various tissues and organs
8. pathology -- pathology refers to the study of diseases of the body and its various tissues and organs.

9. Anatomical terms:

a. anterior refers to the region of the body that is forward
b. posterior refers to the region of the body that is backward
c. medial refers to that region of the body that is nearer the midline
d. lateral refers to that region of the body that is farther from the midline
e. internal refers to the inside of a mass
f. external refers to the outside of a mass
g. proximal refers to the part that is nearest or closest to a source
h. distal refers to the part that is farthest from a source.
i. superior refers to the upper-most part of the body
j. inferior refers to the under-most part of the body
k. cephalad means toward the head end of the body
l. caudad means toward the tail end of the body

10. Motion of joints:

a. flexion refers to bending the extremity inward .
b. extension refers to extending or straightening the extremity forward
c. abduction refers to drawing the extremity away from the midline
d. adduction refers to drawing the extremity nearer to the midline of the body
e. rotation refers to a form of movement where a part rotates around a central axis
f. pronation refers to the act of turning the palm of the hand, or the sole of the foot downward
g. supination refers to the act of turning the palm of the hand, or the sole of the foot upward
h. eversion refers to the act of turning from the inside out
i. inversion refers to the act of turning from the outside in

11. Anatomical postures:

a. supine refers to lying on back
b. prone refers to lying flat on abdomen
c. laterally recumbent refers to lying down on ones side
d. erect refers to act of standing up

12. Anatomical planes:

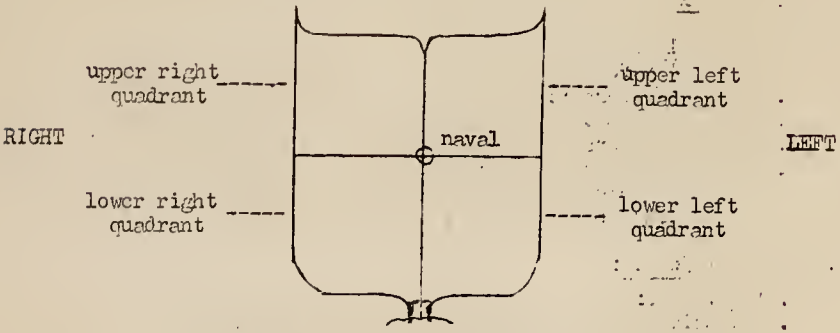
a. sagittal plane refers to a plane which passes from top to bottom dividing body into right and left portions
b. transverse plane refers to a plane which passes crosswise through the body
c. frontal plane refers to a plane which passes from top to bottom dividing the body into anterior and posterior portions

d. Median plane - down the exact c[illegible].

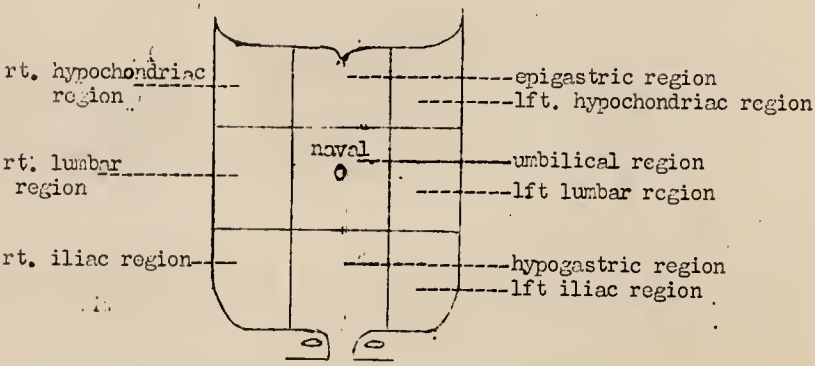
13. Quadrants of the body

a. There are two main basic classifications as follows:

1. Quadrant division



2. Regional division



R-E-S-T-R-I-C-T-E-D

HEADQUARTERS
WESTERN PACIFIC BASE COMMAND
APO 244

SPECIAL ORDERS
NUMBER 86

9 August 1945

1. CAPT RALPH E.GEBHARD 0482676 CH 373d Gen Hosp APO 246 is reld fr DS w/Hq WPBC APO 244 and is placed on DS w/376th Port Bn APO 244. Upon compl of DS off will ret to his asgd orgn and sta for dy. WP. TDN. T by govt MT.

2. Pfc Manuel Negron 32996121 16th Base Post Office APO 249 is trfd in gr and WP Hq Co WPBC APO 244 for dy at Off Mess. EDCMR 12 August 1945. CO of EM conc will see that S/R and allied papers are thoroughly checked and forwarded to new orgn. TDN. T by govt MT.

3. Tec 5 Lester D Minnix 39840671 865th AAA AW Bn APO 244 is reld fr DS w/Hq Co WPBC APO 244 and is trfd in gr thereto. EDCMR 12 August 1945. CO of EM conc will see that S/R and allied papers are thoroughly checked and forwarded to new orgn. No T involved.

4. The fol named EM 39th Sta Hosp APO 244 are reld fr DS w/39th Gen Hosp APO 244 and are placed on DS w/204th Gen Hosp APO 246. Upon compl of DS EM will ret to their asgd orgn and sta for dy:

Tec 5 Werner H Benson	39111770
Tec 5 Julian I Candelaria	38166633
Pfc Carl D Johnson	36644836

TD by first available air T. EM will rpt to the ATCO, Kobler Field for air T. WP. TCS. No per diem auth.

5. The fol named O and EM 39th Sta Hosp APO 244 are reld fr DS w/5th Conv Hosp APO 244 and are placed on DS w/204th Gen Hosp APO 246. Upon compl of DS they will ret to their asgd orgn and sta for dy:

2D LT WENDELL L PUTT	02043279	MAC
Tec 5 Fred L Koots	37512114	
Pfc Gustave A Weiss	32549333	

TD by first available air T. O and EM will rpt to the ATCO, Kobler Field for air T. WP. TDN. TCS. No per diem auth.

6. 1ST LT BYRON E MYCKAND 02048733 MAC 39th Sta Hosp APO 244 is placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS off will ret to his asgd orgn and sta for dy. TD by first available air T. Off will rpt to the ATCO, Kobler Field for air T. TDN. TCS. No per diem auth.

R-E-S-T-R-I-C-T-E-D

SO 86 Hq WPBC APO 244 dtd 9 Aug 45 cont'd

7. The fol named EM 39th Sta Hosp APO 244 are reld fr DS w/148th Gen Hosp APO 244 and are placed on DS and WP/204th Gen Hosp APO 246. Upon compl of DS they will ret to their asgd orgn and sta for dy:

Cpl Elmer L Irvin	37369754
Pfc Steve Hohas Jr	35353634

TD by first available air T. EM will rpt to the ATCC, Kobler Field for air T. TDN. TCS. No per diem auth.

8. Cpl Charles S Heartz 37330144 39th Sta Hosp APO 244 is reld fr DS w/878th Med Sup Det APO 244 and is placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS he will ret to his asgd orgn and sta for dy. TD by first available air T. EM will rpt to the ATCO, Kobler Field for air T. TDN. TCS. No per diem auth.

9. Tec 5 Archie E Nelson 35019017 39th Sta Hosp APO 244 is reld fr DS w/176th Sta Hosp APO 244 and is placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS he will ret to his asgd orgn and sta for dy. TD by first available air T. EM will rpt to the ATCO, Kobler Field for air T. TDN. TCS. No per diem auth.

10. Tec 5 Raymond E Tibbles 37370336 39th Sta Hosp APO 244 is reld fr DS w/31st Med Gp APO 244 and is placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS he will ret to his asgd orgn and sta for dy. TD by first availab air T. EM will rpt to the ATCO, Kobler Field for air T. TDN. TCS. No per diem auth.

11. The fol named EM 39th Sta Hosp APO 244 are placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS they will ret to their asgd orgn and sta for dy:

T Sgt George B Diestel	39247353
Tec 4 Rudolph Zimmerman	37302561

TD by first available air T. EM will rpt to the ATCO, Kobler Field for air T. TDN. TCS. No per diem auth.

12. The fol named EM 21st Med Conv Co APO 244 are placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS they will ret to their asgd orgn and sta for dy:

Tec 4 Michell A Blecharczyk	35318537	Pvt Albert B Cox	18158065
Cpl George Andrushat	36473793	Pvt William R Lesser	32731807
Tec 5 Stuart D Lane	37238402	Pvt William N C Kim	39074339
Tec 5 Anthony F Vitetta	12198374		

TD by first available air T. EM will rpt to the ATCO, Kobler Field for air T. TDN. TCS. No per diem auth.

SO 86 Hq WPBC APO 244 dtd 9 Aug 45 cont'd

13. S Sgt Werner D Mooro 14137356 Hq Co A Garrison Forco APO 247 is placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS ho will rot to his asgd orgn and sta for dy. TD by first available air T. TDN. TCS. No per diem auth.

14. WOJG THOMAS C GORDON W-2120681 USA 308th Gen Hosp APO 247 is placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS off will rot to his asgd orgn and sta for dy. TD by first available air T. TDN. TCS. No per diem auth.

15. The fol named EM 309th Gen Hosp APO 247 are placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS they will ret to tho asgd orgn and sta for dy:

Sgt Merle L Lasley	16070354	Tec 5 Arthur E La Frenier	32297134
Tec 5 James H Burnam	38536604	Pvt Joseph A Gibson	38504493

TD by first available air T. TDN. TCS. No per diem auth.

16. The fol named EM 310th Gen Hosp APO 247 are placed on DS and WP 204th Gen Hosp APO 246. Upon compl of DS they will ret to their asgd orgn and sta for dy:

Pvt Charles A Fikes	36982016
Pvt Robert G Fritz	36977820
Pvt Joseph J Tuzzola	32805673

TD by first available air T. TDN. TCS. No per diem auth.

17. Par 11 SO 55 this Hq as pertaining to 1ST LT JOHN M CARROLL 01062340 CAC Hq WPBC APO 244 being reld fr dy as aide to BRIG GEN EDGAR B COLLADAY 02902 USA Hq WPBC APO 244 and detailed Asst to CofS Hq 1109th POA Prov A Garrison Force APO 244 is rescinded.

18. COCG 1 July 1945: 1ST LT JOHN M CARROLL 01062340 CAC Hq WPBC APO 244 is reld fr dy as aide to BRIG GEN EDGAR B COLLADAY 02902 USA Hq WPBC APO 244 and is detailed Asst to CofS Hq WPBC.

BY COMMAND OF MAJOR GENERAL JARMAN:

OFFICIAL:

C. E. RICHARDSON
Lt. Col., A.G.D.
Adjutant General

G. M. O'CONNELL
Colonel, G.S.C.
Chief of Staff

SO 86 Hq NPBC APO 244 dtd 9 August 45 cont'd

DISTRIBUTION: A plus

Hq USAF MidPac APO 958	(10)
Hq AAFPOA APO 953	(10)
Hq AGF APO 244	(5)
Hq AGF APO 246	(5)
Hq AGF APO 247	(5)
Os conc par 5 6 & 14	(7)
Os conc par 1 & 17	(2)
Ea conc par 4 5 7 8 9 10 11 12 13 15 & 16	(7)
Ea orgn conc	(2)

MITCHEL A BLECHARCZYK

To you who answered the call of your country and served in its Armed Forces to bring about the total defeat of the enemy, I extend the heartfelt thanks of a grateful Nation. As one of the Nation's finest, you undertook the most severe task one can be called upon to perform. Because you demonstrated the fortitude, resourcefulness and calm judgment necessary to carry out that task, we now look to you for leadership and example in further exalting our country in peace.

Harry Truman

THE WHITE HOUSE

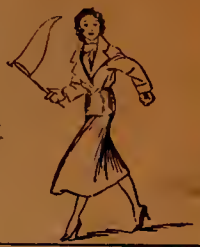
[illegible] R. Born, [illegible]wood, [illegible]inois
Chuck [illegible] Cleveland Ohio
Don Cain Milwaukee Wis
Dale Deering Green Bay Wisc
John Burkait Streator Ill.
Ralph Roland Lebanon Penna.
Jack Cowan Stevens Point, Wisconsin
Malcolm R, Briscoe Charleston, W, Va
Charles W. Burcham Edinburg, Indiana
Johnny Burkart Streator Illinois
Earl Fouts Middletown, Ohio
John Cekus Chicago, Ill.
John [illegible] Klamath Falls, Oregon
Pvt Richard H Cox Warren, Ohio
Sherman Baron Chicago, Ill
Arthur Eastman Chicago Ill
Karl Blok New York City
Melvin F. Goble. Benton Harbor, Mich.
Ralph S. Granger. Toledo, Ohio.
James L Douglas Kalamazoo, Mich.
John Drace Stanley, Wisc.
Joseph M. Garvin Cadiz Ohio.
Paul [illegible] Chicago Ill
John L. Bierbrauer Terre Haute, Ind.
Howard C Beal Chicago Ill
Jim Goffney Akron Ohio
Bill Flanagan Chicago, Ill.
Harold M. Dick - Hartford City, Ind

CLASS SCHEDULE

of

NAME Tpl. M. Baczkiewicz K

SCHOOL Jno. Harrison CLASS



PERIOD	MONDAY COURSE	INSTRUCTOR	ROOM
1			
2			
3			
4			
5	97	M.M.	
6	90	HPD	
7	92	M.A.	
8	97	A-P.	

PERIOD	TUESDAY COURSE	INSTRUCTOR	ROOM
1	100	WMA	
2	100	NURSING	
3			
4			
5		96	
6	11	10'64	
7			
8			

PERIOD	WEDNESDAY COURSE	INSTRUCTOR	ROOM
1		964	
2		100	
3		964	
4		96	
5	10	964	
6		90	
7		64	
8		64	

PERIOD	THURSDAY COURSE	INSTRUCTOR	ROOM
1	764		
2			
3			
4			
5			
6			
7			
8			

PERIOD	FRIDAY COURSE	INSTRUCTOR	ROOM
1			
2		11	
3		5	
4			
5			
6			
7			
8			

PERIOD	SATURDAY COURSE	INSTRUCTOR	ROOM
1			
2			
3			
4			
5			
6			
7			
8			

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